

FACILITY RENTALS APPLICATION FORM Facility.Rentals@burnabyschools.ca General

(604) 296-6904

Rental Information

| Previousinvoice# (if renewing) | |
|---------------------------------------|---|
| Locationpreferred | Alternate location(s) |
| Areas required (gym, classroom, etc) | |
| Start & end date of event(s) | Reoccurring? (daily, weekly, monthly) |
| Start & end time(s) (including set up | ke do <u>wn)</u> |
| Name of primary contact | <u>Jo</u> b title |
| Street address | Postal |
| Phone number(s) | Email address(es) |
| Name of organization/group | Event description |
| Type ofOrganization/Group | durati o fiany event before booking can be confirmed. |
| | Chariable organization, registration# |
| Commercial or public Adul | Youth (under 19) |
| Additional Information | |
| # of participants Parking re | red? Yes No Name of onsite contact |
| Tables/chair needed?setup is respons | ity of user group) Yeş# of tables/chairsNo |
| Sarving found 1 29 O 11' LT LEMC / | /MCID 64 >> DDC /C2 0.4 Tf 0.To 45 06 0.0 45 06 492 29 490 72 Tm >0 |