VAUGHAN
Recreation & Culture

INSTRUCTIONS:
1) To complete form electronically, click on the Typewriter tool at the top of the page.
2) Fill in form by clicking the cursor where you want to type.
3) Save a copy for your records and email a copy to: recreation.permits@vaughan.ca or fax form to: 905-832-8550.

FACILITY REQUEST: SERVICES-IN-KIND EQUIPMENT

Summer 2012 - Spring 2013

DEADLINE DATE: JANUARY 20, 2012

ORGANIZATIONAL PROFILE:

ORGANIZATION'S NAME

ORGANIZATION'S PREVIOUS NAME (If different)

☐ **MINOR** ☐ **ADULT** ☐ **COMMERCIAL** ☐ **REQUESTED PERMITS IN PREVIOUS YEARS**

MAIN CONTACT

SECONDARY CONTACT

E-MAIL ADDRESS

E-MAIL ADDRESS

ADDRESS

ADDRESS

CITY

CITY

( ) BUS. PHONE NO. ( ) HOME PHONE NO.

( ) BUS. PHONE NO. ( ) HOME PHONE NO.

PLAYERS/MEMBERSHIP LIST ATTACHED? ☐ YES ☐ NO

PLEASE NOTE: Accounts must be in good standing and a Players/Membership list, including full addresses and phone numbers for all groups (youth groups also require birthdates) must be submitted before requests can be considered.

EQUIPMENT TYPE: Please list quantity.

☐ **BLEACHERS: LARGE**	☐ **GARBAGE CONTAINERS**	☐ **RECYCLING TOTERS**	☐ **STAGE**
☐ **BLEACHERS: SMALL**	☐ **GENERATOR***	☐ **SHOWMOBILE**	☐ **TABLES**
☐ **CHAIRS**	☐ **PICNIC TABLES**	☐ **SOUND SYSTEM***	

☐ **OTHER:**

* Must be delivered and signed for, or picked up.

☐ Layout drawing attached

SPECIFIC LOCATION FOR DELIVERY OF EQUIPMENT

TYPE OF EVENT

DATE OF EVENT

We invite all past users to provide us with feedback, comments or issues regarding their event, date, location, etc.

I hereby request use of the above location(s) on the dates and times shown. As part of the consideration for the City of Vaughan renting the above noted facilities to me/us, I, on behalf of myself, the renting organization and its members agree to release and discharge, and to indemnify and save harmless the Municipality from and against all claims and proceedings, by whom/whoever made or brought, in respect of any cost, losses, damage or injury arising by reason of my/our use of the rental facilities.

☐ **I AGREE** I have read and understood the Rental Contract Conditions & Regulations and agree to abide by these conditions for all of the dates/times issued by this request.

APPLICANTS SIGNATURE (MIN. AGE 18 YEARS OF AGE) DATE

City of Vaughan
2141 Major Mackenzie Drive
Vaughan, Ontario L6A 1T1
TEL. 905-832-8500 FAX. 905-832-8550
WEB: www.vaughan.ca

FOR OFFICE USE ONLY

DATE REC'D

F#

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