

REQUEST FOR USE OF VOLLIS SIMPSON WHIRLIGIG PARK

(For Office Use Only)

DATE OF REQUEST: _____

NAME OF PERSON IN CHARGE: _____

NAME OF SPONSORING ORGANIZATION: _____

ADDRESS: _____

PHONE: B: _____ C: _____

EMAIL: _____

AREA REQUESTED: Check One: _____ Quadrant _____ Green _____ BOTH (Quadrant and Green)

PURPOSE OF USE (Dance, Banquet, Family Reunion, etc.)

PERSONS EXPECTED _____ ADMISSION CHARGED? _____

EVENT DATE: Month: _____

EVENT TIME: _____ TO _____

Date: _____

Day: _____

EVENT ENTERED ON MASTER CALENDAR: _____ YES _____ NO

ABC PERMIT REQUIRED: (Check One) _____ YES _____ NO

BEGIN SET UP: _____ CLEAN UP TIME: _____

LAW ENFORCEMENT LESSEE IS REQUIRED TO SECURE FOR EVENT: _____

(0-99=1; 100-199=2; etc) (Off Duty Wilson Police and Secured by Lessee)

RENT _____ DEPOSIT _____ DEPT LABOR _____

NON-DEPT LABOR _____

TOTAL DUE: \$ _____ SUPERVISOR: _____

APPROVAL : _____ DATE PAID: _____

REFERENCES: Name: _____ Phone #: _____

Name: _____ Phone #: _____

ADDITIONAL

REMARKS: _____

