

Willis Point Fire Protection and Recreation Facilities Commission

COMMUNITY HALL BOOKING APPLICATION

Name of Applicant: _____

Address: _____

Phone: _____ Cell: _____ Email: _____

Applicants must be at least 19 years of age

Date(s) Requested: _____ Time: _____

Rate Type:

- Hourly
- Hourly (with Kitchen)
- Full Day
- Marquee

Sponsor/Liability Insurance Coverage:

- Willis Point Community Association (WPCA)
- Willis Point Fire Fighters Association (WPFFA)
- Other (specify and provide proof of insurance):

I confirm that this event is covered by the WPCA or WPFFA liability insurance

Name: _____ Position: _____

Signature: _____ Date: _____

On-Site Contact (if other than applicant):

Name: _____

Address: _____

Phone: _____ Cell: _____

All renters must comply with the Willis Point Community Hall Rental Terms of Use, and with all applicable laws, including obtaining all necessary permits and licenses related to the serving of food and/or alcohol. Cheques for payment MUST be made out to the CRD.

Applicant's Signature: _____

Must be at least 19 years of age

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