

RENTAL REQUEST FORM

Please submit completed form to <u>bookings@wilmot.ca</u> Please do not send payment with this form as this does not confirm your request and is not a valid permit.

*Required Fields- there may be a delay in the processing of requests if required fields are missing

Booking Information

*Type of Facility (i.e:	
arena,gym,meeting room,	
community centre, ice,	
sportsfield, picnic shelter	
*Event Name & Description	
*Number of Attendees	

*Will alcohol be served?	YES		NO			
Note: if yes, event must b	e boo	oked	at least 6 we	eks prie	or to eve	nt date

Customer Information

*Full Name	
*Address	
(including Postal Code)	
*Phone Number	
*Email Address	
*Date of Birth(mm/dd/yy)	

*Are you making this request on behalf of an organization? YES \square NO \square

If yes please provide Organization details

Name of Organization	
Authorized Agent(s)	
Address (including postal code)	

*Email Address	
*Phone Number	

Date(s) and Time(s) Requested- please add additional page if required

Preferred Date(s)	Start Time (including set-up)	End time (including clean-up)	Preferred Location(s)

Do you require access to a kitchen?	YES	NO	
*Will you be playing music? SOCAN/RESOUND fees applicable	YES	NO	
*Will there be dancing?	YES	NO	

Additonal comments or Requests

*Insurance

The Permit Holder is required to provide a Certificate of Insurance evidencing General Liability Insurance in an amount not less than \$2,000,000 per occurrence, providing coverage for bodily injury and property damage and have the Township of Wilmot listed as 'Additional Insured'. Should the Permit Holder not have the required insurance coverage, they may be added to the Township Facility User Insurance Policy by remitting the required premium at the time of the Rental Permit is issued.

I choose to purchase insurance	
I will provide my own isurance	

Submitted by: ____

Full Name

Date:

Once you have completed the this form, please email it to <u>bookings@wilmot.ca</u> for us to begin working on your event contract/ permit.

Personal information collected on this form is collected under the authority of the MFIPPA <u>Municipal</u> <u>Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. M.56 (ontario.ca)</u> as amended and will be used for the purpose of facility rentals and bookings at the Township of Wilmot.

> email: <u>bookings@wilmot.ca</u> 519-634-9225