

YOUTH CENTRE BIRTHDAY PARTY APPLICATION

Wilmot Recreation Complex - 1291, Nafziger Rd. Baden, ON. N3A 0C4

Customer Information

Account Holder Name (18 years and	
older)	
Date of Birth (MM/DD/YYY)	
Address (including postal code)	
Phone Number	
Email Address	
Child(s) Name	
Child(s) Age	

Booking Times

Available times are based on regular non-programmed room times.

Saturday	11:30 AM - 5:30 PM	
Sunday	11:30 AM – 5:30 PM	

Date and Time Requested

Minimum of 2-hour rental time.

Preferred Date(s)	Party Type	Start Time (including set-up)	End Time (including clean-up)

Craft Request 1. Bendable Doodles 2. Party Keepsake Picture Frames 3. Keychains 4. Straw Paintings 5. Slime **Participant Information** How many guests will be attending your party? (Please remember to include everyone that will be in the room.) Remember there is a maximum of 15 participants for the party. What is the age range of your guests? Will you have one adult in the room? ☐ Yes □ No How many adults will be in the room? Do you require a table for food? ☐ Yes □ No (Please note food many only be eaten at the table.) **Additional 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' including cross-liability endorsement, severability of interest provisions and contractual liability. 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 at a rate of \$4.82 per hour \square
l will provide my own insurance □
Submitted by:
Date:

Once you have completed this form, please email it to lacey.smith@wilmot.ca for us to begin working on your event.

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

Email: lacey.smith@wilmot.ca

519-634-9225 x9361