



# Chatham-Kent Facility Rental Request

## Basic Information

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Organization Name \_\_\_\_\_

Address \_\_\_\_\_

City/Prov./Postal Code \_\_\_\_\_

Phone \_\_\_\_\_

Alt Phone \_\_\_\_\_

Email \_\_\_\_\_

## Event Details

Rental Purpose \_\_\_\_\_

Date/Times of Rental \_\_\_\_\_

Location \_\_\_\_\_

Rooms \_\_\_\_\_

Additional Information \_\_\_\_\_

## Purchasing Insurance through the Municipality Details

Number of People at Event \_\_\_\_\_

Activity \_\_\_\_\_

Will Provide Own Insurance