DEPARTMENT OF PARKS & RECREATION

683 Oak Street - Post Office Box 179 – Franklin, Virginia 23851 (757)562-2475 –Email: bwilkerson@franklinva.com

APPLICATION FORM – ACTIVITIES/RENTALS OF FACILITIES

Name or Sponsoring Organization _			
Address	City		
Contact Person	Telephone #		
Email Address	Is this a Fundraising Event? Yes No		s No
If yes, admission price?	Estimated Attendance		
Date(s) of Activity	Time (start/finish)		
Nature of Activity	·		
Requested Area			
Rental Fee Securi	ty Deposit	Date Paid	
Will food and beverages be served	? Yes No	Will food be sold? Yes	No
Will ABC license be applied for? Yes	s No	_ .	
event is a rental, the applicant has TWO we period, the application for the event will be will have to be arranged by the sponsoring food will be sold, a special events packet for the event. It will be the applicant's respond permit.	<u>e voided.</u> All special ed 3 organization. For all a rom the Franklin Healt	quipment such as tables, chairs, p activities/rentals of department fa h Department will be given to the	/a system, etc., acilities, in which e contact person
Signature of Applican	t		Pate
A conference is required:Poli			
Director of Parks & Recre	ation	D	ate



OFFICE USE ONLY				
and Security Deposit of		was paid on		
	Cash _			
Signature	-	Date		
		Cash _		