



EVENT (NOT REQUIRING A PERMIT) INFORMATION FORM

ORGANIZER INFORMATION			
Organization Name:			
Name of Event Organizer:			
Address:			
Email Address:		Phone:	()
Alternate Contact:		Phone:	()
Event Address:		Phone:	()
EVENT INFORMATION			
Event Name:			
Event Date:			
Event Location:			
Event Time:			
Event Type:			
Approximate Attendance:			
Serving Alcohol:	Y N	(please circle)	
NOTES:			
SIGN & DATE			
Signature of Event Organizer:		Date:	
OFFICE USE ONLY			
Report Recorder:			
Site Plan Attached	Y N		
Bolo Number:			
Date Received:			


The personal information provided by you is being collected under the authority of the *Municipal Government Act* and will be used for the purposes under that Act. The personal information that you provide may be made public, subject to the provisions of the *Freedom of Information and Protection of Privacy Act*.


SITE PLAN


Location: _____



Please include:

 Location of Liquor Tent/Venue

 Location of Portable Toilets

 Entrance/Exits