

Parks and Recreation Department | Program/Event/Meeting Planning Information Form

Title:										
Description (submit as much info as possible):										
Information for RECEIPT (Ex: Supply List, Contact Info, etc.):										
Revenue Name or #:					Revise or Change from existing submission: <input type="checkbox"/> YES <input type="checkbox"/> NO					
How are you going to collect money:		<input type="checkbox"/> Course Registration capture name, register, pay & get class list		<input type="checkbox"/> Point of Sale anonymous transaction using POS button		<input type="checkbox"/> Memberships issue card collect data through scans		<input type="checkbox"/> Facility Booking need space at facility only – no need to register or track participants		<input type="checkbox"/> Marketing/Brochure ONLY (not at city facility)
Is this an ATTENDANCE ONLY event? (if you need RSVP/count food, seating, etc – and don't need household account yet) <input type="checkbox"/> YES <input type="checkbox"/> NO										
Dates (be specific)	Day(s) of week	Start Time	End Time	Registration End Date	Ages	# of Classes	Fee	Facility Name	Area/Room	Total Hours Used <small>(setup/clean up time)</small>
Extra Fee(s):			Supply Fee(s) (paid to instructor):				Min # of Participants:		Max # of Participants:	
Special Requests:										
Instructor:					Phone:		Phone:		Email Address:	
Address:							City:		State:	Zip:
Requesting Coordinator/Supervisor: KAYLA SNOW							Division: HEALTH & WELLNESS		Date:	
Processed by (initial):		Indoor Centers			Active Input			Marketing		Other
Approved by:							Date:		Rental #:	
Comments:										

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