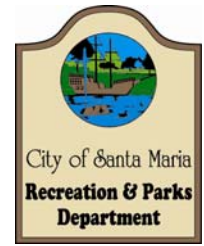




CITY OF SANTA MARIA
RECREATION AND PARKS DEPARTMENT
615 SOUTH McCLELLAND STREET
SANTA MARIA, CA 93454
(805) 925-0951, EXT. 260



Agency/Organization Facility Reservation Form

| | | | | | |
|---|--|---|-------------------|---|--|
| Today's Date: | | New Reservation: | | Amended Reservation: | |
| Name of Agency/Organization: | | | | | |
| Address: | | | | | |
| Requested By: | | | | | |
| Telephone Number: | | Cell/Work Number: | | FAX Number: | |
| | | | | | |
| Type of Event/Activity: | | | | | |
| Facility Requested: | | | | | |
| Room(s)/Field(s) Requested: | | | | | |
| On-Site Event Coordinator: | | | | Phone number: | |
| 2 nd On-Site Event Coordinator: | | | | Phone number: | |
| Expected Attendance: | | | | Table Layout Attached: <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| Caterers- Food: | | | Caterers- Liquor: | | |
| Type of Music: | | | | Dance: <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| Admission fee charged to general public? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | If so, how much? | |
| | | | | | |
| DAY(S)/DATE(S) | | TIMES OF USE (Includes set-up and tear-down) | | EVENT START AND END TIME | |
| | | | | | |
| | | | | | |
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FOR ADDITIONAL DATES/TIMES, PLEASE USE A SEPARATE SHEET OF PAPER.