



APPLICATION TO HOLD A SPECIAL EVENT, TOURNAMENT, RUN, WALK

Attn: Booking Coordinator/Supervisor of Sports and Outdoor Recreation
CITY OF BURNABY, PARKS, RECREATION AND CULTURAL SERVICES
 #101 – 4946 Canada Way, Burnaby, BC V5G 4H7
 Telephone: (604) 294-7459 Email: parksallotments@burnaby.ca

Spring/Summer requests Due October 31 of previous year

Fall/Winter requests Due March 31 of current year

A SUBMISSION OF THIS APPLICATION IS A REQUEST TO USE PARK SPACE AND DOES NOT GUARANTEE APPROVAL OR PERMIT

Organization Name:		Date of Application:	
Name of Event:		Purpose of Event:	
Contact Name:		Address:	
City:	Province:	Postal Code:	
Website of Organization and/or Event:		Email Address:	
Home Tel No:	Work Tel No:	Fax No.	
Name of Authorized Signatory (Person legally permitted to sign allotment agreement):			
Is Organization: Registered non-profit Society? No: <input type="radio"/> Yes: <input type="radio"/> # _____		Attach copy of certificate of incorporation/ List of directors	
Incorporated Company? No: <input type="radio"/> Yes: <input type="radio"/> # _____		Attach copy of certificate of incorporation/ List of directors	
# of Participants:	# of Spectators (approx.)	# of Volunteers	
# of Teams (if applicable):		# of Games (if applicable):	
Event Related Vehicles:			
Event Description including the type, schedule & description of activities. Please attach additional page(s), if required.			
Is this a one-time event or is it held annually?			
If a Run/Walk, provide proposed assembly area:		Propose Dispersal Area:	
Attach map with proposed route			
Is the event open to the public?		If not, why?	

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Location Requested (List 1 st , 2 nd & 3 rd choices)	Date(s) (List 1 st , 2 nd & 3 rd choices)	Event Times	Set-up Time	Take-Down Time

Will you be requesting any of the following at your event? (Please provide details below or attached)

Food Preparation	Yes <input type="radio"/>	No <input type="radio"/>	Amplified Sound (music, PA)	Yes <input type="radio"/>	No <input type="radio"/>
Food Vendors	Yes <input type="radio"/>	No <input type="radio"/>	Alcoholic Beverages	Yes <input type="radio"/>	No <input type="radio"/>
Merchandise Vendors	Yes <input type="radio"/>	No <input type="radio"/>	Temporary Structures (tents, stage)	Yes <input type="radio"/>	No <input type="radio"/>
Power required	Yes <input type="radio"/>	No <input type="radio"/>	ATM machine required	Yes <input type="radio"/>	No <input type="radio"/>
Do you have your own general liability coverage?				Yes <input type="radio"/>	No <input type="radio"/>

Entertainment (i.e. bouncy castles, amusement rides, inflatable, petting zoos, pony rides etc.):

Please list any additional services your event may require (i.e. washroom access, port-a-potties, extra garbage cans, etc.)
Extra costs may be incurred

Event Background:

Where was the event held in previous years (city & park or facility name)? _____

Facility contact person & phone number _____

How many years have you held this event? _____

Please note: No refunds will be issued for Tournament/Special Events unless the facility/site can be re-booked. Client will be required to provide liability insurance for the event. Further details will be provided if event approval is granted.