

NELSON & DISTRICT COMMUNITY COMPLEX FACILITY REQUEST

Date of request: _____

Facility requested: _____

Group name: _____

Main contact: _____

Home phone: _____

Work phone: _____

Email address: _____

Day: _____

Time: _____

Start date: _____

End date: _____

When would you like to stop for the Christmas holidays and start again:

Last day wanted: _____

First day wanted: _____

Are there any other days that you do not require your requested time?
(ie: long weekends)

Office use only

Contract #	Date Faxed	E-Mail	P/U
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