

### APPLICATION FOR USE OF SPACE AT THE

### RALPH THORNTON CENTRE

765 Queen St. E., Toronto, ON M4M 1H3 416-392-6810

info@ralphthornton.org http://ralphthornton.org

https://www.ralphthornton.org/use-our-space/our-spaces/ for information about the space available at RTC. You will also find useful information in <a href="https://www.ralphthornton.org/use-our-space">https://www.ralphthornton.org/use-our-space</a>, and <a href="https://www.ralphthornton.org/use-our-space/rates/">https://www.ralphthornton.org/use-our-space/rates/</a>.

#### **NOTES:**

- Complete this form to apply to use space in the Ralph Thornton Centre.
- This form is an application only and space will not be reserved until you have signed
  a Use of Space Agreement and paid all the fees for use of the space.
- Once RTC receives the form, staff will reply to you within [3] business days.
- If the space you've applied for isn't available at the time/date you've requested, you can ask staff to check other times/dates.

If you have any questions or would like help completing the form, please phone or drop into the Ralph Thornton Centre Reception during office hours. We'll be pleased to help!

#### **HOW TO COMPLETE THIS FORM ONLINE:**

- 1. DOWNLOAD THIS FORM AND SAVE IT
- 2. SAVE IT FREQUENTLY AS YOU COMPLETE IT
- 3. YOU CAN MAKE AMENDMENTS EVEN AFTER YOU'VE SAVED IT
- 4. ONCE IT'S COMPLETED, SAVE IT AGAIN
- 5. YOU CAN EITHER EMAIL IT TO <a href="mailto:info@ralphthornton.org">info@ralphthornton.org</a> OR FAX IT TO 416 392-0025 OR DROP IT IN TO RTC RECEPTION DURING OFFICE HOURS
- 6. IF YOU DROP IT OFF IN PERSON, STAFF MAY BE AVAILABLE TO HELP WITH THE NEXT STAGE OF YOUR APPLICATION

#### **HOW TO COMPLETE THIS FORM BY HAND:**

- 1. PRINT THE FORM
- 2. COMPLETE IT IN BLACK INK IN CAPITAL LETTERS
- 3. DELIVER IT TO RTC RECEPTION BY FAX OR MAIL, OR IN PERSON DURING OFFICE HOURS.
- 4. IF YOU DROP IT OFF IN PERSON, STAFF MAY BE AVAILABLE TO HELP WITH THE NEXT STAGE OF YOUR APPLICATION

January 2020 Page 1 of 6

## APPLICATION FOR USE OF SPACE AT THE RALPH THORNTON CENTRE

| NAME(S) AND CO                        | NTACT DETAILS             |          |          |                    |     |                |                        |
|---------------------------------------|---------------------------|----------|----------|--------------------|-----|----------------|------------------------|
| Name:                                 |                           | First    | name:    |                    |     | Last name:     |                        |
|                                       |                           |          |          |                    |     |                |                        |
| Name of Organizat                     |                           |          |          |                    | •   |                |                        |
| this if your booking is fo            | r an organization         |          |          |                    |     |                |                        |
| Phone number                          | Phone number:             |          | Alt. Ph  | none number:       |     | Email:         |                        |
| and email:                            |                           |          |          |                    |     |                |                        |
|                                       |                           |          |          |                    |     |                |                        |
| Contact Address:                      |                           | Unit ‡   | ‡ and St | reet:              |     |                |                        |
| or that of your organiza              | tion.                     |          |          |                    |     |                |                        |
|                                       |                           | City:    |          |                    |     |                |                        |
|                                       |                           |          |          |                    |     |                |                        |
|                                       |                           | Provi    | nce:     |                    |     | Postal co      | de:                    |
|                                       |                           |          |          |                    |     |                |                        |
|                                       |                           |          |          |                    |     |                |                        |
| ALTERNATE CON                         |                           |          |          |                    |     |                |                        |
| · · · · · · · · · · · · · · · · · · · |                           | act per  | rson we  | can get in touc    | h w | ith if you are | en't available and who |
| will also be present a                | •                         | F        |          |                    |     |                |                        |
| Name of second c                      | ontact person:            | First i  | name:    |                    | Las | st name:       |                        |
|                                       | D/                        |          | A4 . 1   |                    |     | - 7            |                        |
| Phone number                          | Phone number:             |          | Alt. ph  | one number:        | Em  | nail:          |                        |
| and email:                            |                           |          |          |                    |     |                |                        |
| 1. TYPE OF EVEN                       | T                         |          |          |                    |     |                |                        |
| Type of event(s):                     | Leisure or re             | croati   | onal n   | rogram             |     |                |                        |
| Check all boxes that                  |                           |          |          | Togram             |     |                |                        |
| describe your event                   | Educational               |          |          | 00 1-)             |     |                |                        |
|                                       | Small meetin              | -        |          |                    |     |                |                        |
|                                       | Large meetin              | <u> </u> | re tha   | n 20 people)       |     |                |                        |
|                                       | Celebration/p             | arty     |          |                    |     |                |                        |
|                                       | Other                     |          |          |                    |     |                |                        |
| If you checked "ot                    | her" please desc          | ribe y   | our      |                    |     |                |                        |
| event here:                           |                           |          |          |                    |     |                |                        |
| M/h a a a a a a t a a a l t la        |                           |          |          |                    |     | Chook ony h    | avec that apply        |
| Who can attend th                     | e event(s)?               |          |          | Anyon              |     | Check any b    | oxes that apply        |
| Daamla vulsa livu                     |                           | -61      | laaall   | Anyon              |     |                |                        |
| People wno live                       | e, work or go to s        |          |          | y to the Centrated |     |                |                        |
| Mem                                   | يعور<br>bers of the orgai |          |          |                    |     |                |                        |
| IVICII                                |                           |          |          | gister to atten    |     |                |                        |
|                                       | rec                       | hie w    |          |                    |     |                |                        |
|                                       |                           |          | INVIT    | ed guests on       | -   |                |                        |
|                                       |                           |          | Г        | Othe               | er  |                |                        |
| If you checked "ot details:           | ner", please give         | furth    | er       |                    |     |                |                        |

January 2020 Page 2 of 6

| 2. SPACE REQUIRE   |                         |          |                     |       |        |                    |                    |                  |         |                   |          |    |  |  |  |  |  |  |
|--|-------------------------|----------|---------------------|-------|--------|--------------------|--------------------|------------------|---------|-------------------|----------|----|--|--|--|--|--|--|
| NOTES: You can find our  | •                       |          |                     | _     |        |                    |                    |                  |         |                   | •        |    |  |  |  |  |  |  |
| and the Schedule of Fees <a href="http://www.ralphthornton.org/wp-content/uploads/2015/07/2016-Fee-Schedule-conten&lt;/td&gt;&lt;td&gt;&lt;u&gt; 1edule-&lt;/u&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;&lt;/td&gt;&lt;td colspan=8&gt;Simplified.pdf. I'd like to book the space(s) I've checked below:&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;Deio&lt;/td&gt;&lt;td&gt;w.&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;1 =&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Riverdale Auditorium&lt;/td&gt;&lt;td&gt;&lt;b&gt;n:&lt;/b&gt; Check one box o&lt;/td&gt;&lt;td&gt;only&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td colspan=3&gt;Full auditorium&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;Or&lt;/td&gt;&lt;td&gt;ne se&lt;/td&gt;&lt;td&gt;ction only&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;Tv&lt;/td&gt;&lt;td&gt;vo se&lt;/td&gt;&lt;td&gt;ctions only&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Multipurpose Room:&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;Re&lt;/td&gt;&lt;td&gt;quir&lt;/td&gt;&lt;td&gt;ed&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Betsy Swift Commun&lt;/td&gt;&lt;td&gt;nity Kitchen:&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;Re&lt;/td&gt;&lt;td&gt;quir&lt;/td&gt;&lt;td&gt;ed&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Community Meeting&lt;/td&gt;&lt;td&gt;Room:&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;Re&lt;/td&gt;&lt;td&gt;quir&lt;/td&gt;&lt;td&gt;ed&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Mezzanine&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;Re&lt;/td&gt;&lt;td&gt;quire&lt;/td&gt;&lt;td&gt;ed&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Foundation Room:&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;Re&lt;/td&gt;&lt;td&gt;quir&lt;/td&gt;&lt;td&gt;ed&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;2 DOOM CET UD&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;3. ROOM SET-UP Approximate numbe&lt;/td&gt;&lt;td&gt;r of people atte&lt;/td&gt;&lt;td&gt;ndina&lt;/td&gt;&lt;td&gt;n: Ento&lt;/td&gt;&lt;td&gt;r the&lt;/td&gt;&lt;td&gt;2 011&lt;/td&gt;&lt;td&gt;mbor of r&lt;/td&gt;&lt;td&gt;noon!&lt;/td&gt;&lt;td&gt;lo.&lt;/td&gt;&lt;td&gt;l&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;you expect to attend (you&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;eopi&lt;/td&gt;&lt;td&gt;E&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Planned room set-up&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;,&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;,&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Lecture:&lt;/td&gt;&lt;td&gt;Seminar:&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;Ме&lt;/td&gt;&lt;td&gt;etir&lt;/td&gt;&lt;td&gt;ng:&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;Clas&lt;/td&gt;&lt;td&gt;ssroom:&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Social:&lt;/td&gt;&lt;td&gt;Exercise:&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;No&lt;/td&gt;&lt;td&gt;ne:&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td colspan=2&gt;Other:&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;If you checked " othe<="" td=""><td>er", please give</td><td>furth</td><td>er de</td><td>tails</td><td>s:</td><td></td><td></td><td></td><td></td><td></td><td></td></a> |                         |          |                     |       |        |                    |                    | er", please give | furth   | er de             | tails    | s: |  |  |  |  |  |  |
| I'd like to book the fo  | ollowing <u>furnitu</u> | re: In   | sert a r            | numl  | ber f  | or each o          | ption              | n. Inse          | ert the | number of items y | ou want. |    |  |  |  |  |  |  |
| Chairs   | Tables: 3ft             | x6ft     |                     |       |        |                    | 4 ft. Round Tables |                  |         |                   |          |    |  |  |  |  |  |  |
| 4 ft. Square Tables  |                         |          |                     |       |        | 5 ft. Round Tables |                    |                  |         |                   |          |    |  |  |  |  |  |  |
| Yes – I'd like to book   | the following           | equip    | ment                | : Ins | sert ' | Y or N             |                    |                  |         |                   |          |    |  |  |  |  |  |  |
| Laptop P   | rojector:               |          | PA:                 | Mic d | & sp   | eakers             |                    |                  | Pi      | ano: 2nd floor    |          |    |  |  |  |  |  |  |
|  | PC not supplied)        |          | - 2 <sup>nd</sup> 1 | floor | only   | /                  |                    |                  | on      |                   |          |    |  |  |  |  |  |  |
| Flip chart stand: Insert '0' or #  |                         |          | chart<br>t '0' or   |       |        |                    |                    |                  | Po      | odium             |          |    |  |  |  |  |  |  |
| moore o or m   |                         | ,,,,,,,, |                     | ,, 0, | paa    |                    |                    |                  |         |                   |          |    |  |  |  |  |  |  |
| 4. ADDITIONAL AM   | ENITIES                 |          |                     |       |        |                    |                    |                  |         |                   |          |    |  |  |  |  |  |  |
| Small Glasses (6 oz.)  | Large Glas              | ses (1   | 12 oz.)             |       |        | Coffee             | Mug                | gs               |         | Wine Glasses      |          |    |  |  |  |  |  |  |
| Dinner Plates  | Side Plates             | ;        |                     |       |        | Bowls              |                    |                  |         | Water Pitchers    | 3        |    |  |  |  |  |  |  |
| Dinner Forks   | Dessert Fo              | rks      |                     |       |        | Dinner             | Kni                | ves              |         | Soup Spoons       |          |    |  |  |  |  |  |  |
| Teaspoons  | Coffee Urn              |          |                     |       |        | Chafin             | a Di               | sh               |         | Table Cloths      |          |    |  |  |  |  |  |  |

**Yes – I want to bring the following equipment:** Insert details of any equipment you plan to bring and use before, during or after your event. Examples: electrical or electronic equipment that will need connecting; decorations; extra furniture.

January 2020 Page 3 of 6

## APPLICATION FOR USE OF SPACE AT THE RALPH THORNTON CENTRE

| 5. REGISTRATION OR OTHER CH                   | <b>HARGE</b> | S          |                             |                    |                     |            |                   |       |            |
|---|--------------|------------|-----------------------------|--------------------|---------------------|------------|-------------------|-------|------------|
| Will there be an entry or registration        | on fee       | ?          | Yes                         |                    |                     | No         | No                |       |            |
| Check one box only                            |              |            |                             |                    |                     |            |                   |       |            |
|   |              |            |                             |                    |                     |            |                   |       |            |
| Will people attending the event be            | asked        | d to       |                             |                    |                     |            |                   |       |            |
| pay for anything else? Check one bo           |              |            |                             |                    |                     |            |                   |       |            |
| If "yes", describe what they will be          | •            | d to pa    | y for: Click                |                    |                     |            |                   |       |            |
| on the shaded area to insert a description o  | f what p     | eople wi   | ll be asked to              | •                  |                     |            |                   |       |            |
| pay for                                       | pay for      |            |                             |                    |                     |            |                   |       |            |
|   |              |            |                             |                    |                     |            |                   |       |            |
| 6. SERVING OF ALCHOHOL                        |              |            |                             |                    |                     |            |                   |       |            |
| NOTES: If you intend to serve alcohol yo      | ou may       | need to    | plan well ir                | <mark>advan</mark> | ice to e            | ensure yo  | ou me             | et a  | ıll RTC's  |
| requirements. See [details] for details.      |              |            |                             |                    |                     |            | 1                 |       |            |
| Do you intend to serve alcohol at             | the ev       | ent? Cl    | <mark>heck one box</mark>   | only               | Yes                 |            | No                |       |            |
|   |              |            |                             |                    |                     |            |                   |       |            |
|   |              |            |                             |                    |                     |            |                   |       |            |
| 7. NUMBER OF BOOKINGS                         |              |            |                             |                    |                     |            |                   |       |            |
|   |              |            |                             | Check              | one bo              | x only     |                   |       |            |
| I just want to book an event on on            | e day:       |            |                             |                    | → GO TO SECTION 8.  |            |                   |       |            |
|   | •            |            |                             |                    |                     |            |                   |       |            |
| I want to make bookings for sever             | al date      | es:        |                             |                    | → GO TO SECTION 10. |            |                   |       |            |
| Select this option only if you are planning a |              |            |                             |                    |                     |            |                   |       |            |
| Examples: a yoga class once a month; a re     | gular me     | eting of   | a social                    |                    |                     |            |                   |       |            |
| group.  |              |            |                             |                    |                     |            |                   |       |            |
| 8. → I JUST WANT TO BOOK AN                   | EVEN.        | T ON C     | NE DAY                      |                    |                     |            |                   |       |            |
| NOTES: You can book space for a minim         |              |            |                             | must s             | tart an             | d and or   | the h             | 20111 | r or half- |
| hour.   | iuiii oi c   | Jile Hou   | i. Dookiiigs                | iiiust s           | tartar              | iu enu oi  | i tile i          | ioui  | Of Hall-   |
| I want to book time on this date:             | Day of       | the wee    | ık                          | Month              |                     |            | Da                | te    | Year       |
| I want to book time on this date.             | 2 4 7 6 7    |            |                             | 13101              |                     |            |                   |       |            |
|   |              |            |                             |                    |                     |            |                   |       |            |
| The event will begin at:                      | Time -       | Example    | e: 9:00, 12:30              | Che                | ck a.m.             | or p.m.    |                   |       |            |
|   |              |            |                             | a.m                | ۱.                  |            | p.                | m.    |            |
| <del>-</del>                                  | Time         |            | 4.00 40.0                   | Check a.m. or p.m. |                     |            |                   |       |            |
| The event will end at:                        | Time -       | Example    | e: 4:00, 12:30              | a.m                |                     | or p.m.    | n                 | p.m.  |            |
|   |              |            |                             | a.ii               | 1.                  |            | ρ.                |       |            |
| NOTES: If you have applied to use the K       | itchen,      | you ma     | y want to u                 | se it be           | fore a              | nd after v | you n             | eed   | the other  |
| room(s) you apply for.                        | ,            | -          | -                           |                    |                     | •          | •                 |       |            |
| I will need access to the Kitchen to          |              |            | - Example: 9:00, 12:30 Chec |                    |                     | Check a.   | ck a.m. or p.m.   |       |            |
| prepare for the event at:                     |              |            |                             |                    |                     | a.m.       |                   |       | m.         |
| • •   |              | <b>T</b> ' | Fugural C                   | 20 42 2            |                     | Oh '       |                   |       |            |
| I will need time after the event to           |              | Time -     | Example: 9:0                | 10, 12:3           | SU                  |            | heck a.m. or p.m. |       |            |
| and tidy the <u>Kitchen</u> . Everyone wi     | II           |            |                             |                    |                     | a.m.       |                   | p.i   | III.       |
| have left the kitchen by:                     |              |            |                             |                    |                     |            |                   |       |            |

January 2020 Page 4 of 6

# APPLICATION FOR USE OF SPACE AT THE RALPH THORNTON CENTRE

| NOTES: Will you need time in the Auditorium, Activity Room or Basement before the event starts in order  |                             |                    |         |   |  |  |  |  |
|--|-----------------------------|--------------------|---------|---|--|--|--|--|
| to prepare for the event? Will you need time afterwards to tidy up and leave the room ready for the next |                             |                    |         |   |  |  |  |  |
| user? The Centre does not set up furniture for space users.  |                             |                    |         |   |  |  |  |  |
| I will need access to set up for the event at:   | Time - Example: 9:00, 12:30 | Check a.m. or p.m. |         | Enter the name(s) of the room(s) you will need access to before the event |  |  |  |  |
| ap is the state at   |                             | a.m.               | p.m.    |   |  |  |  |  |
| I'll need time to tidy up,<br>but everyone will have left  | Time - Example: 4:00, 12:30 | Check a.m.         | or p.m. | Enter the name(s) of the room(s) you will need access to after the event  |  |  |  |  |
| the room(s) by:  |                             | a.m.               | p.m.    |   |  |  |  |  |
|  |                             | •                  | •       |   |  |  |  |  |

| 9. IF MY FIRST CHOICE OF DATE ISN'T AVAILABLE THIS IS MY SECOND CHOICE: |                 |       |      |      |  |  |  |
|---|-----------------|-------|------|------|--|--|--|
|   | Day of the week | Month | Date | Year |  |  |  |
|   |                 |       |      |      |  |  |  |
| ***** <u>NOW GO TO SECTION 11</u> *****                                 |                 |       |      |      |  |  |  |

| 10. → I WANT TO MAKE BOOKINGS FOR SEVERAL DATES  |                       |       |                   |      |      |  |  |  |  |
|--|-----------------------|-------|-------------------|------|------|--|--|--|--|
| NOTES: You can book space for a minimum of one hour. Bookings must start and end on the hour or half-  |                       |       |                   |      |      |  |  |  |  |
| hour. You can book repeat events for a maximum period of twelve months.  |                       |       |                   |      |      |  |  |  |  |
| This event will take place: Check  | Every day             |       | Once a montl      | า    |      |  |  |  |  |
| one box only   | Once a week           |       | Other             |      |      |  |  |  |  |
| If you checked "other", please give  | further               |       |                   |      |      |  |  |  |  |
| <b>details:</b> Click on the shaded area to insert the days on which this event will take place. Examples: Mon & Thurs each week; 2 <sup>nd</sup> and 4 <sup>th</sup> Wednesday of month |                       |       |                   |      |      |  |  |  |  |
| The <u>first date</u> I want to book time  | Day of the week       | Month |                   | Date | Year |  |  |  |  |
| for is:  |                       |       |                   |      |      |  |  |  |  |
| The <u>final date</u> I want to book time  | Day of the week       | Month |                   | Date | Year |  |  |  |  |
| for is:  |                       |       |                   |      |      |  |  |  |  |
| The event will always begin at:  | Time - Example: 9:00, | 12:30 | Check a.m. or p.i | n.   |      |  |  |  |  |
|  |                       |       | a.m.              | p.m. |      |  |  |  |  |
| The event will always end at:  | Time - Example: 4:00, | 12:30 | Check a.m. or p.i | n.   |      |  |  |  |  |
|  |                       |       | a.m.              | p.m. |      |  |  |  |  |

| <b>NOTES</b> : If you have applied to use the <b>Kitchen</b> , you may want to use it before and after you need the other |                             |                    |        |  |  |  |  |
|---|-----------------------------|--------------------|--------|--|--|--|--|
| room(s) you apply for.  |                             |                    |        |  |  |  |  |
| I will need access to the Kitchen to  | Time - Example: 9:00, 12:30 | Check a.m. or      | r p.m. |  |  |  |  |
| prepare for the event at:   |                             | a.m.               | p.m.   |  |  |  |  |
| I will need time after the event to clean   | Time - Example: 9:00, 12:30 | Check a.m. or p.m. |        |  |  |  |  |
| and tidy the <u>Kitchen</u> . Everyone will   |                             | a.m.               | p.m.   |  |  |  |  |
| have left the kitchen by:   |                             |                    |        |  |  |  |  |

January 2020 Page 5 of 6

| NOTES: Will you need time in the Auditorium, Activity Room or Common Room before the event starts in        |                                |                    |            |   |  |  |  |
|---|--------------------------------|--------------------|------------|---|--|--|--|
| order to prepare for the event? Will you need time afterwards to tidy up and leave the room ready for the   |                                |                    |            |   |  |  |  |
| next user? The Centre does not set up furniture for space users. You can get details of available furniture |                                |                    |            |   |  |  |  |
| and equipment from [link]   |                                |                    |            |   |  |  |  |
| I will need access to set up for the event at:  | 0.00 40.00                     |                    | n. or p.m. | Enter the name(s) of the room(s) you will need access to before the event |  |  |  |
| ap ioi and overtean   |                                | a.m.               | p.m.       |   |  |  |  |
| I'll need time to tidy up,<br>but everyone will have left   | Time - Example:<br>4:00, 12:30 | Check a.m. or p.m. |            | Enter the name(s) of the room(s) you will need access to after the event  |  |  |  |
| the room(s) by:   |                                | a.m.               | p.m.       |   |  |  |  |
|   |                                | •                  |            |   |  |  |  |

| 11.IF MY FIRST CHOICE OF DATES ISN'T AVAILABLE THIS IS MY SECOND CHOICE: |                 |       |      |      |  |  |  |
|--|-----------------|-------|------|------|--|--|--|
| The first date I want to   | Day of the week | Month | Date | Year |  |  |  |
| book time for is:  |                 |       |      |      |  |  |  |
| The final date I want to   | Day of the week | Month | Date | Year |  |  |  |
| book time for is:  |                 |       |      |      |  |  |  |

| 11. I WANT TO BOOK THE BETSY SWIFT COMMUNITY KITCHEN  |          |     |  |  |  |  |  |  |
|---|----------|-----|--|--|--|--|--|--|
| Only complete this section if you want to book the Kitchen.   |          |     |  |  |  |  |  |  |
| NOTES: There various categories of use for the Kitchen. These are described in full in the [policy] and [User |          |     |  |  |  |  |  |  |
| Guide]. Fees vary with the type of use. A deposit is charged for all use of the kitchen.                      |          |     |  |  |  |  |  |  |
| Have you or your organization used the kitchen before   | e?       | N.  |  |  |  |  |  |  |
|   | Yes      | No  |  |  |  |  |  |  |
| If "yes" please give the approximate date: example - Mai  | rch 2009 | 1 1 |  |  |  |  |  |  |
| Please describe how you will use the kitchen:   | ·        |     |  |  |  |  |  |  |
| Examples:   |          |     |  |  |  |  |  |  |
| <ul> <li>Prepare or store refreshments such as coffee/tea/cookies</li> </ul>                                  |          |     |  |  |  |  |  |  |
| <ul> <li>Prepare cold refreshments such as a buffet lunch</li> </ul>  |          |     |  |  |  |  |  |  |
| - Cook and eat food   |          |     |  |  |  |  |  |  |
| <ul> <li>Cook food for eating elsewhere</li> </ul>  |          |     |  |  |  |  |  |  |
| - Demonstrate/teach a cooking class   |          |     |  |  |  |  |  |  |

THANK YOU FOR COMPLETING THIS FORM
SEE PAGE 1 FOR INFORMATION ON HOW TO SUBMIT IT.

January 2020 Page 6 of 6