



USER REQUEST INFORMATION FORM

EMAIL ADDRESS:

DATE: / /200

NAME:

ORGANIZATION:

PHONE:

ADDRESS:

BLDG.: **Wahconah Park**

USE TYPE:

ALCOHOL BEING SERVED: YES NO

CORRECT ADDRESS TO MAIL REFUND:

KITCHEN REQUIRED: YES NO

HEAT REQUIRED (Mid Oct to Mid April) YES NO

PROFIT NON-PROFIT

REQUESTED DATE(S):

REQUESTED TIME(S): TO

NOTES:

For Office Use only:

FORM(S) SENT – YES NO

FORM(S) REC'D – YES NO