

Subsidy Request Form for Facility Rental

Applicant Information	
Name of Organization / Individual:	
Contact Person:	
Phone Number:	
Email Address:	
Rental Request Details	
Name of Space Requested:	
Requested Date(s):	
Requested Time(s):	
Total Hours Requested:	
Event / Activity Details	
Name of Program or Event:	
Brief Description of Activity:	
Is this a youth program Yes / No What Age I	Range of Participants (if applicable):

Community Benefit		
Is this event/program open to the public? Yes / No At what cost?		
Are you able to "pay it forward" in free or reduced cost access to your program for youth or those in need? Yes / No		
Describe how this event benefits the community:		
Subsidy Request		
Is your program or event supported by any gra	ants: Yes / No	
What percentage subsidy are you requesting? $\Box 25 \ \Box 50 \ \Box 75 \ \Box 100$		
Descen for requesting subsides		
Reason for requesting subsidy:		
Additional Notes or Special Requests		
Signature		
Signature of Applicant:	Date:	
Please allow 3-5 business days for approval.		
For Office Use Only – Executive Direct		
Approved by Executive Director:	Date:	
Notes or Conditions (if any):		