

Village of Holiday Lake, Inc.

FUNCTION REQUEST FORM

Request Form for use of the Recreation Hall and Activity Rooms.

For all Activities, Meeting, Parties and Weekly Functions.

*****PLEASE COMPLETE FORM AND RETURN IT TO DARLENE IN THE OFFICE. THANK YOU.*****

NAME OF FUNCTION: _____

WEEKLY FUNCTION: (CIRCLE) YES NO

FULL DATE OF FUNCTION OR WEEKLY ACTIVITY: _____

FULL DATE OF FUNCTION OR WEEKLY ACTIVITY WILL END: _____

TIME: _____

PLACE TO BE HELD: _____

TABLE(S) REQUEST AND HOW MANY: _____

BAND: _____ PHONE: _____

BAND CONTACT PERSON

SPEAKER: _____ PHONE: _____

DO YOU NEED TO USE THE SOUND SYSTEM? YES _____ NO _____

USE OF KITCHEN: YES _____ NO _____

*IF YES, A \$50.00 DEPOSIT FOR THE USE OF THE KITCHEN IS REQUIRED TO BE GIVEN TO THE KITCHEN CHAIRPERSON.
KITCHEN CHAIRPERSON: KATHY AMELIA (941) 697-7137*

SPONSORING COMMITTEE OR GROUP: _____

PERSON IN CHARGE: _____ PHONE: _____

E-MAIL: _____

SIGNATURE: _____ DATE SUBMITTED: _____

APPROVAL SIGNATURE: _____ DATE: _____

RECREATION CHAIRPERSON