## Facility Use/Event Registration Request

Name of event:			
Date(s) of event:	_ Begin time:	End time:	
Capacity Adult:	Capacity Youth:		
Cost Adult:	Cost Youth:	Unit Co	st?
Email address for contact person:			
Facility(ies) requested for use (Locatio	n of event):		
Specific buildings/campsites needed (o	quantity/capacity of each):		
Is the Adventure Card discount applica	ble to this event?		
Information to be collected at registra	tion:		
Name of attendee:			
Age of attendee:			
Email of attendee:			
Gender of attendee:			
Address of attendee:			
Phone of attendee:			
Unit #/Town of attendee:			
Quantity of attendees (if you only nee	d to know how many attending	y) youth:	adult:
Any other information to be collected	?		
Cutoff date for event?			
Confirmation emails should go to:			
If there is any other information we m	ight need, please submit on a s	eparate sheet of pa	aper.
Completion of this form does not auto	matically secure facility use. Yo	ur request will be o	confirmed via email.
Council use only: Registration link created SOA Calendar listing			

SOA Newsletter listing\_\_\_