



**PARKS, RECREATION & CULTURE SERVICES
REQUEST FOR USE OF CITY OF OTTAWA PARKS**

Please: Mail, fax, email or deliver the completed proposal to:

City Wide Allocations
101 CentrepoinTE Drive, Ottawa On, K2G 5K7
E-mail : sports@ottawa.ca Fax: 613-580-2683 Internal Mail code 04-54 Telephone: 613-580-2595

CONTACT INFORMATION:

Please complete ALL sections of information requested on this form.

Date of Application: <input style="width: 90%;" type="text"/>	
Name of Group/Club/Association (if applicable): <input style="width: 95%;" type="text"/>	Telephone (office / cell): <input style="width: 95%;" type="text"/>
Name and Title of Primary Contact: (i.e. President) must be 18 years or older <input type="radio"/> MR <input type="radio"/> MRS <input style="width: 80%;" type="text"/>	Telephone (home / evening): <input style="width: 95%;" type="text"/>
Address: <input style="width: 95%;" type="text"/>	E-mail: <input style="width: 95%;" type="text"/>
City: <input style="width: 25%;" type="text"/> Province: <input style="width: 25%;" type="text"/> Postal Code: <input style="width: 25%;" type="text"/>	Fax: <input style="width: 95%;" type="text"/>
Name and Title of Secondary Contact: <input style="width: 95%;" type="text"/>	Telephone (office / cell): <input style="width: 95%;" type="text"/>
Address: <input style="width: 95%;" type="text"/>	Telephone (home / evening): <input style="width: 95%;" type="text"/>
City: <input style="width: 95%;" type="text"/>	Fax: <input style="width: 95%;" type="text"/>
Province: <input style="width: 30%;" type="text"/> Postal Code: <input style="width: 20%;" type="text"/>	Email: <input style="width: 95%;" type="text"/>
Name and Title of Last Year's Contact (if different) and/or previous permit number: <input style="width: 95%;" type="text"/>	Telephone (home): <input style="width: 95%;" type="text"/>
<p>PLEASE NOTIFY CITY STAFF WHEN THERE IS A CHANGE IN YOUR CONTACT INFORMATION.</p>	

EVENT INFORMATION:

Type of Activity the park will be used for (i.e. picnic). Check ALL boxes that apply.

Picnic
 Barbeque
 Child Birthday
 Adult Birthday
 Family Reunion
 Walk a Thon
 Filming
 Wedding
 Commercial Venture / For Profit

 Other

Please provide as much detail as possible about your planned event (subject to approvals) :

Does your event require:

Special Occasion (Liquor) Permit: <input type="radio"/> Yes <input type="radio"/> Non	Request For Open Air Fire (Campfire) <input type="radio"/> Yes <input type="radio"/> No
No. of Participants: <input style="width: 200px;" type="text"/>	Age Group: <input style="width: 200px;" type="text"/>

If you are expecting more than 500 people for your event, the [Special Event Application form](#) must be filled out as well (per the Special Events Bylaw).

PARK INFORMATION:

Park Requested (name & Address)	Area (within park)	Day (of week)	Date	Time (Start to Finish)

Freedom of Information Statement

Personal information is collected on this form pursuant to s. 11(1)(5) of the Municipal Act, 2001, S.O. 2001, c.25, and will be used for the purposes of processing your application and management of the City of Ottawa recreation and culture programs. Questions regarding this collection may be addressed to the Portfolio Manager, Allocations at 613- 580-2424 ext. 41678, 101 Centrepointe Drive, Ottawa, Ontario, K2G 5K7.

I hereby declare that the information provided is to the best of my knowledge, accurate, and that the City of Ottawa reserves the right to verify such information. Any application submitted providing false information could cancel any privileges granted under this application and disqualify the applicant for further eligibility.

Signature of Applicant:

Date:

Please note that this application is subject to approval before an official permit is issued.