

LAKEVIEW UNITED CHURCH

SPACE USE

REQUEST

Requesting organization: _____

Category of Space User: (Please check and complete one choice only)

- Charity – CRA charitable registration number: _____
- Non-Profit (AB Companies Act) – describe group: _____
- Individual/Business – describe activity: _____

Proposed Use(s): (Summarize the use – activity, numbers...)

- One-Time Use Recurring Use

Requested Date(s): _____

Requested Time(s): _____

Requested Room(s): _____

Requested Storage: _____

Person Making Request: _____

Phone: _____ Email: _____

Date of Request: _____

Request received by: _____

Request approved by: _____

Specific terms of use: _____