



## ARENAS SPECIAL EVENT APPLICATION

Please complete and return the following application form to the Community Services Division by **4:30pm on February 14, 2026** Please specify each facility you will need as well as the time and dates you require. **Please complete the entire form.**

Date: \_\_\_\_\_

Organization: \_\_\_\_\_

Contact person: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Primary Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Event Date(s): \_\_\_\_\_

Alternate Date(s): \_\_\_\_\_

Event Name: \_\_\_\_\_

Desired Rink(s):      S3 West                      S3 East                      InnovationPlex

**MONTH:** \_\_\_\_\_

DAY(S)	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Set-up Time							
Start Time							
End Time & Clean-up							

\* Additional charges may be applied for set-up and clean-up.

**Facility Options (additional charges may apply):**

Rectangle Tables	How many:	Oval Tables <small>(InnovationPlex)</small>	How many:
Chairs	How many:	Drapery <small>(InnovationPlex)</small>	How many feet:

