

Send completed form to parkingeventrentals@calgary.co	ca
Date of Request:	

EVENT RENTAL REQUEST FORM

Event Title:	
Event Start Date*:	
Event Start Time*:	
*Including set up and take down.	
Event Contact Information	
Event Contact Information Organization Name:	
Legal Name: Same as above	
Contact Person Name:	
Phone #:Organization Address:	Email:
	no If yes, applicable number is:
	no If yes, applicable number is:
City of Calgary Festival and Events Subsidy A	
City of Calgary restival and Events Subsidy A	pplication (ii applicable).
Billing Information	
Organization Name:	
Billing To Name:	
Phone #:	
Billing Address:	
Preferred Payment Method: () credit ca	ard (over phone)
, ,	
Event Venue	
Lot #: Lot Address	
Lot Use: Oparking Oparking	event staging ovendor booths other
If other, details include:	
I am requesting to use a portion of the lost	t only and I have identified this area on a map in my email.
Event Specifics	
Have you hosted this event before?	no yes, the date/location was:
Brief Description:	
Food or Drink: yes	no
If yes, details include:	
Alcohol and/or Cannabis: O yes	no
If yes, details include:	
Materials or Equipment brought On-site:	○ yes ○ no
If yes, the items include:	
Number of people expected (including both	attendees and volunteers/staff):
Who can attend the event?	cketed 🔘 it is open to the public other:
Any other details to share?	

The personal information collected herein is authorized under Section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act of Alberta, and will be used for the purpose of **Event Rentals**. Should you have questions about the use of your information, please contact <u>ParkingFoip@calqary.ca</u>.



¹ In person payment is only accepted at the Municipal Impound Lot (400- 39 Avenue SE).