



Canada's Tournament Capital

TODAY'S DATE _____

City of Kamloops

Parks, Recreation, and Cultural Services Department

SPECIAL EVENT REQUIREMENTS

User Group Name _____ Contact _____

Address _____ City _____ Postal Code _____

Phone (h) _____ (w) _____ (fax) _____

Email _____

Date of Event _____

Name of Park _____ Area of Park _____

Set-up Date _____ Set-up Time _____

Name of Event _____

Number of People Expected _____

Gate Access Required

Access to Electricity Required

Tables/Chairs (when available)

Number of Tables Required _____

Number of Chairs Required _____

Date Required _____

Large Kitchen

Time kitchen to be opened _____

Time kitchen to be closed _____

Bandshell Curtain - between 7 a.m. - 9 p.m.

Time curtain to be opened _____

Time curtain to be closed _____

Parking Passes

No. of parking passes required _____ max. 2

Location of parking passes _____

Pathway

Start Time _____ Finish Time _____

Walk/Run Route (in detail) _____
