



Recreation Sponsored Facility Use Application /Survey Request Form

Thank you for your interest in volunteering to be the contact for a recreation sponsored activity. Please complete and return this application to the Recreation Services Representative (RSR) any Regional Recreation Center or Recreation Administration Office. You will be contacted by the RSR or Resident Lifestyle Volunteer Staff after the application has been reviewed.

Visit our website at 'www.districtgov.org' to review the Resident Lifestyle Guidelines for room usage.

Date of Application: _____

Name of Activity Group: _____

Resident Contact Name: _____

Resident ID #: _____ Phone: _____

Address: _____

_____ Email: _____

2nd Resident Contact Name: _____

Resident ID #: _____ Phone: _____

Email: _____

Region Preference (Circle One)

Colony Cottage 750-1935

La Hacienda 753-1716

Laurel Manor 751-7110

Lake Miona 430-2950

Mulberry Grove 259-6040

Paradise 753-0637

Savannah 750-6084

SeeBreeze 750-2488

This application will be reviewed as a **request** and does not guarantee a specific facility, day or time.

Permits for room use are issued if approved by a Recreation Manager. Similar activity times will be offered the same day and time as existing activities whenever possible. Please indicate your meeting preferences below and we will try to accommodate your request.

Activity Level (Circle One): Basic Intermediate Advanced Practice N/A

Preferred Day (Circle Any): SU M TU W TH F S

Preferred Time (Include Hours): Morning _____ Afternoon _____ Evening _____

Frequency: Twice a Month Monthly Quarterly If Other, Specify: _____

Description of Club/Activity: _____

This Section to be completed by the Staff and submitted to the Recreation Manager for Approval

RSR Name: _____

Date Submitted: _____

Survey Approval Date: _____

Notifying Contact by phone: _____

Notes: _____

Date of Meeting / Location: _____