

The Villages®

Community Development Districts Recreation & Parks



984 Old Mill Run, The Villages, FL 32162
Office Hours Monday through Friday 8am-5pm
Phone: 352-674-1800 Website: www.DistrictGov.org

Facility Reservation Application

Thank you for your interest in the use of our facility for your event. This application will be viewed as a request and does not guarantee a facility reservation. In our efforts to meet your request, a staff member will be in contact with you upon reviewing your application. Please allow 5-10 business days for processing.

FACILITIES ARE OPEN MONDAY THROUGH SUNDAY 7AM-10PM

Individual	Resident Lifestyle Group	Business, Government, Etc.
Name:	Leader Name: ID #:	Your Name:
Resident ID #:	Group Name: Permit #:	Entity Name:
<i>(if applicable)</i>	New Leader Name: ID #: <i>(if applicable)</i>	

Address: _____ City: _____ State: _____ Zip: _____

Village: _____ Home Phone #: _____ Cell Phone #: _____

Email: _____ Estimate # Attendees: _____

Event/Group Name: _____ **Will attendees of this function be:**

Is this an annual or repeat of a previous event? (circle one) Yes No

Residents Non-Residents Both

Brief Description of Event/ Reason for change: _____

Facility/Recreation Center Requested: _____

1st Choice: _____ 2nd Choice: _____

Dates Requested: 1st Choice: _____ 2nd Choice: _____

Requested time –Set up Time: _____ Start Time: _____ End Time: _____

Requested Room Type? **Card Room Arts & Crafts Med Banquet Large Room Theatre**

Dance floor needed? **Yes No**

Additional A/V Equipment needed? **Projector/Screen TV Additional Mics (2 included) Wifi**

Kitchen access requested: **Yes No**

Will event be catered?: _____ If yes, by whom? _____

Will alcoholic beverages be served?: _____ If yes, **BYOB (personal consumption only)** **Florida Licensed Bartender**

HOW TO SUBMIT THE APPLICATION:

Resident Lifestyle Request: *Deliver in person to the Regional Recreation Center that oversees your permit*

Room Reservations: *Fax, e-mail or deliver in person to Recreation Administration Office*

Fax: 352-674-1815

Email: RoomReservations@Districtgov.org

The District reserves the right to cancel or alter facility/room use, and will notify Applicant of any changes. In the event of a required change, every effort will be made to accommodate the affected group or organization.

Signature: _____

Revised June 30, 2017

For Official Use Only	
Date Received: _____	RSR Name: _____
Recreation Manager Approval Initials: _____	Permit #: _____