## Pike County Multi-Purpose Complex Application

Contact Information							
Organization Name:							
Contact Name:							
Address:	City:	State:	Zip:				
Telephone:	Alternate Phone:						
Email:							
Type of Event:							
Expected Attendance:	Participant Category	/: Under 21	Family Event	General Public			
	(Select One)						
Is Organization a 501 (c)(3)?	If yes, provide Tax I.D.:						
Is this a fund-raiser for your organization?							
Do you intend to solicit donations or a fee from attendees?							
Special Requests:							

Room Request	Date	Start Time	End Time
Pike Room			
Magnolia Room			
Main Room			
Full Facility			
Kitchen			
Outdoor and Restrooms			
Decoration/Set up			

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Food / Beverage			
Will kitchen be used for co	oking or serving?		
Will food be served?	<del></del> -		·
(indicate catering service if	applicable)		
What type of beverages will	l be served?		
Will Concession Vendors be	e used?		
			· · · · · · · · · · · · · · · · · · ·
Additional Requests			
Please indicate any addition	nal requests that you n	nay have:	
			·
			······································
Request Form Verification	n (Office use only—at	tach to executed contract)	
Reviewed by:			
Will additional hours be re	quired for decoration/	/rehearsals?	
Will security officers be re	quired? If so, how ma	iny?	
Date Received:		Date Approved/Disapproved	:
Approved:	Disapproved:	If disapproved, why?	
Application Approved/Dis	approved by:	I	
Date Contract Sent:		I Date Contract Received:	
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