

# RENTAL REQUEST FORM



TODAY'S DATE:  
YYYY/MM/DD

## USER INFORMATION

**ORGANIZATION:** \_\_\_\_\_ **CONTACT NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **POSTAL CODE:** \_\_\_\_\_

**PHONE (Business):** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

**PHONE (Home):** \_\_\_\_\_ **FAX:** \_\_\_\_\_

## FACILITY BOOKINGS

SEND TO **PANORAMA RECREATION** EMAIL: [info@panoramarec.bc.ca](mailto:info@panoramarec.bc.ca) FAX 250.656.3360

<b>Panorama Recreation Centre</b>	<b>Greenglade Community Centre</b>	<b>North Saanich Middle School</b>
<input type="checkbox"/> Arena Concourse Room	<input type="checkbox"/> Room 5 - Small Fitness Studio	<input type="checkbox"/> Multipurpose Room
<input type="checkbox"/> Boardroom	<input type="checkbox"/> Room 6 - Classroom	<input type="checkbox"/> Gymnasium - 1/2
<input type="checkbox"/> Island Room	<input type="checkbox"/> Sports Field	<input type="checkbox"/> Gymnasium - Full
<input type="checkbox"/> Poolside Room	<input type="checkbox"/>	
	<input type="checkbox"/> Room 7 - Classroom	
	<input type="checkbox"/> Room 8 - Classroom	
	<input type="checkbox"/> Gymnasium	
	<input type="checkbox"/> Baseball Field	

**Pool**  
For Pool bookings and information, please contact Martin Henderson at 250.655.2182 or [mhenderson@panoramarec.bc.ca](mailto:mhenderson@panoramarec.bc.ca)

**Central Saanich Cultural Centre**

Room A

Room B

## ARENA RENTALS

SEND TO **BOOKINGS** EMAIL: [info@panoramarec.bc.ca](mailto:info@panoramarec.bc.ca) FAX 250.656.3360

<b>Arena A</b>	<b>Arena B</b>
<input type="checkbox"/> Arena A (Ice) <input type="checkbox"/> Arena A (Dry Floor)	<input type="checkbox"/> Arena B (Ice) <input type="checkbox"/> Arena B (Dry Floor)

## PURPOSE & DATE OF REQUEST

**PURPOSE OF RENTAL:** \_\_\_\_\_ **# OF PARTICIPANTS:** \_\_\_\_\_

\_\_\_\_\_ **# OF SPECTATORS:** \_\_\_\_\_

**AGE GROUP:**     Age 18 Years & Younger     Age 19 Years & Older

**DAY/S REQUESTED:**     M     Tu     W     Th     F     Sa     Su    **TO**     M     Tu     W     Th     F     Sa     Su

**DATE/S REQUESTED:**     TO        **TIME REQUESTED:**     AM     PM    **TO**     AM     PM

## LIABILITY/INSURANCE

Insurance Attached (Required)

## ADDITIONAL REQUESTS

*\*Your rental contract MUST BE SIGNED within 10 days and the RENTAL FEE PAID as per contract to confirm the booking/s. Failure to comply will result in the loss of the booking date & fee.*

*\*Please contact Reception at 250-656-7271 to make your payment.*