

# FACILITIES PERMIT APPLICATION



## *BALTIMORE COUNTY DEPARTMENT OF RECREATION AND PARKS*

WHITE MARSH REC. OFFICE / 9033 HONEYGO BLVD, PERRY HALL,  
MD 21128  
**410-887-5187**

For Rec Office Use Only:

CSII \_\_\_\_\_  
Submitted: \_\_\_\_\_  
OL: \_\_\_\_\_  
School Rec: \_\_\_\_\_  
BCPS App: \_\_\_\_\_  
NtoC: \_\_\_\_\_

CHAIRPERSON NAME: \_\_\_\_\_ REC COUNCIL: \_\_\_\_\_

FULL ADDRESS: \_\_\_\_\_

PHONE #1: \_\_\_\_\_

PHONE #2: \_\_\_\_\_

( PLEASE INDICATE WHICH NUMBER IS PREF. FOR THE REC OFFICE TO USE IN NEWSLETTERS OR TO GIVE TO COMMUNITY MEMBERS WITH PROGRAM QUESTIONS)

EMAIL: \_\_\_\_\_

(IF ANOTHER EMAIL IS PREFERRED FOR NEWSLETTERS AND COMMUNITY, PLEASE PROVIDE THAT AS WELL)

**Please fill out a separate request for each site. Include all needs including registration, coach's mtgs, awards ceremonies, recitals, etc.**

SCHOOL REQUESTED (use a different form for each site): \_\_\_\_\_

PROGRAM & DESCRIPTION: \_\_\_\_\_

PROGRAM START DATE: \_\_\_\_\_ PROGRAM END DATE: \_\_\_\_\_

REGISTRATION START DATE \_\_\_\_\_ REGISTRATION END DATE \_\_\_\_\_ COUNCIL WEBSITE UPDATED? YES \_\_\_ NO \_\_\_

ESTIMATED ATTENDANCE PER DAY/NIGHT: \_\_\_\_\_ AGE GROUP: \_\_\_\_\_ REGISTRATION FEE: \_\_\_\_\_

ONLINE REGISTRATION: Yes \_\_\_ No \_\_\_ IN-PERSON REGISTRATION: Yes \_\_\_ No \_\_\_ If yes, request facility, date & time below

**Include time for set-up and clean-up, if necessary. Facility will be open at exact time listed on this request. Please plan on vacating at ending time.**

START DATE	END DATE	DAY OF WEEK	OPEN TIME	CLOSE TIME	GYM	CAFÉ	REC ROOM	AUD	CLASS ROOM	MULTI PURPOSE ROOM	GROUNDS (specify)	OTHER (specify)

What facilities did your program use last school year? \_\_\_\_\_

**Please return to rec. office via fax, email, or USPS mail no later than 5 weeks prior to dates requested.**

CHAIRPERSON SIGNATURE AND DATE SUBMITTED: \_\_\_\_\_