

Recreational Facility Allocation Package

Please read and complete entire package prior to sending back to Facilities Bookings. Instructions on how to fill out the forms are listed below. If you have any questions, please contact administration at facility.bookings@beaumont.ab.ca

Instructions:

Organization Contact Information for Allocation of Recreational Facilities

1. Organization Information

- List the name of your organization that you are applying for allocation, please include full name not abbreviations.
- List the mailing address and postal code for the organization
- Provide two contacts for your organization who will be the direct contact between City Administration and your organization
- Is your Organization Non-Profit or Profit?
 - Non-Profit is an organization with a registered society or recognized community group
 - o Profit, your organization looks to profit from the activity

2. Organization Registrations

- 2025 Participants state expected or current # of registrants for the upcoming allocation period.
- 2024 Participants state the past number of registrants for the same period last year.
- Difference between years subtract the expected participants from the previous 2024 season to see if there is an increase or decrease in the number of participations.

3. In-season or Off-season

- In-season is considered when most games and practices occur
- Off-season is considered where most time is spent on development and practices building up to in season

4. Local or Non-Local Participants

- State if your organization is local or non-local
 - Local users must have seventy percent (70%) or more of membership comprised of Beaumont citizens, or are within the Beaumont area
 - The City of Beaumont reserves the right to request membership lists
 - Calculated by the number of identified members defined as local divided by the total number of members

5. Minor or Adult Organizations

- State if your organization is Minor or Adult
 - Seventy percent (70%) of the membership/participants are seventeen
 (17) years old or younger



Allocation Request Form

Fill out the date in the top left corner that the form is submitted

Fill out the Organization Name and the Main Contact at the top of the sheet.

Fill out the Start Date and End Date for the needed times for the facility for each day of the week.

If you have various start and end dates that are different from most of the season, please fill out a separate form for that specific period. For example, dates for tryouts and preseason will be different from season use.

Beside each location, please list as accurately as possible the times needed. Enter a Start Time and an End Time. Times can be broken up into different segments by spacing over.

If any further detailed information needs to be provided, please add it to the notes and comments section

Please complete the allocation form by initialing/signing the document, listing your role with the organization, user organization, and date.

Please submit on or before the deadline date to facility.bookings@beaumont.ab.ca

Tournament or Special Event Request

Please fill out a separate request for each special event.

Answer the following questions:

Event Name/ What Is It

Event Dates

Start and Ends Times for each day.

Number of games per day.

Number of Teams Participating

All locations required. (Arenas, specific fields, lobby, warmup areas)

Number of Tables and Chairs

Other equipment needed (systems, trash cans, picnic tables)

Additional questions regarding alcohol, vendors, and outdoor events. – Examples of vendor could include vendors selling merchandise, food trucks, or beer garden.

Please complete the Tournament or Special Event form

Representative signature/initial

Role in Organization

User Group Name

Date Completed

Submission of forms:

Please submit all forms by the deadline for the facility and allocation period to:

Facility.bookings@beaumont.ab.ca



Organization Contact Information for Allocation of Recreational Facilities

1.	Organization Information							
	Name of Organization:							
	Address:							
	Postal Code:							
	Main Contact Name:							
	Main Contact Email:							
	Main Contact: Phone:							
	Secondary Contact:							
	Secondary Contact Email:							
	Secondary Contact: Phone							
	Organization Status: Non-							
	profit or Profit							
2.	Organization Registrations							
	2025 Participants							
	2024 Participants							
	Difference between years							
	Percentage increase or							
	decrease							
3.	In Season / Out of Season							
	In-season or Off -Season:							
4.	Local or Non-Local Participants							
	% Of identified members							
	who are residents of							
	Beaumont							
5.	Minor or Adult Organization							
	Youth or Adult Focused							
	Organization							



Arena Allocation Request

Request Date	Spring/Summer (May 1 - August 31)	Ice Dry Surface	<u>Deadline:</u> December 1st 11:59pm					
Please submit separate forms for each season								
Organization: Main Email:								
List date range and all time requests below. Attach a separate list of times if more space is required.								

Main Season

Day of week	Start Date	End Date	Start Time	End Time	Arena 1st Choice	Arena 2nd Choice	Additional Information
Manday							
Monday							
Tuesday							
Wednesday							***************************************
Thursday							
Friday							
Saturday							
Sunday		5					

Arena Tournament or Special Event Request

Request Date:	Spring/Summer (May 1 - August 31)				Ice	L	<u>Deadline:</u> December 1st	
				ı	Ory Surface	11:59pm		
<u>-</u>	***Plea	<u>se subn</u>	nit sepa	arate fo	rms for each e	vent**	<u>*</u>	
Organization:				Main Emai	l:			
Main Contact:			Main Contact Phone:					
Event Name/Ty	pe:							
Event Dates:								
Start Time/End Time/	Per Day:							
Number of Gam								
Number of Teams/Par	ticipants:							
All Locations Required: (Rooms, Arenas- <i>How Many</i> , Lobbies, Etc.)					y			
Number of Tabl	es:				Number of Chai	rs:	 	
Other Equipment Requested:								
		** ta	ables/chairs	are subject	to availability **			
Alcohol:		No						
Vendors:		No						
Outdoor Events:	Yes	No						
Ī	Requests for sp A to provide liab	pecial events are Il groups are res ility insurance n	e to be submisponsible for S aming the Cit	tted with the a SOCAN and RE y of Beaumont	mbers and residency percenta nnual allocation request on a SOUND fees for their activitie as an additional insured at th ording to the fees and charge	separate forms. e time the allo	l.	
used for the administration a	and manageme	ent of the City o	f Beaumont's	Recreation Fa	eedom of Information and Pro cility bookings. If you have a 5600-49th Street, Beaumont,	ny questions a	bout the collection or use of	
User Group Signature					Role			
User Group Printed Name								