

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 <u>facility.bookings@beaumont.ab.ca</u>

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
 - 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

5. Minor or Adult Organization

Youth or Adult Focused	
Organization	



MPR/Hall Allocation Request

Request Date:	Fall/Winter (September 1 - April 30)	KNRRC	ССВСС	BSRC	<u>Deadline:</u> February 1st 11:59pm					
	Please submit separate forms for each season									
Organization:	Prganization: Main Email:									
List date range and all time requests below. Attach a separate list of times if more space is required.										

Main Season									
	Start Date	End Date	Start Time	End Time	Room #/ Name	Room #/ Name	Room Abbreviations		
<u>Monday</u>							KNB	KNRRC Banquet Rm	
							KNS	KNRRC Small Meeting Rm	
							BR 1	CCBCC Breakout Rm #1	
<u>Tuesday</u>							BR 2	CCBCC Breakout Rm #2	
						101111111111111111111111111111111111111	BR 3	CCBCC Breakout Rm #3	
							BR 4	CCBCC Breakout Rm #4	
<u>Wednesday</u>							BR D1/2	CCBCC Double Breakout Rm #1/2	
		6					BR D3/4	CCBCC Double Breakout Rm #3/4	
							CCMR	CCBCC Community Meeting Rm	
<u>Thursday</u>							CBR	CCBCC Boardroom	
							FH	CCBCC Full Hall	
							LRGH	CCBCC Large Hall	
<u>Friday</u>							SMH	CCBCC Small Hall	
							EVR	BSRC Event Rm	
							211	BSRC Rm #211	
<u>Saturday</u>							213	BSRC Rm #213	
							215A	BSRC Rm #215A	
							215B	BSRC Rm #215B	
<u>Sunday</u>							215F	BSRC Full Rm #215 A/B	

Main Season

User Group Signature

User Group Printed Name

MPR/Hall Tournament or Special Event Request

Request Date:	Fall/Winter (September 1 - April 30)								
	Please submit separate forms for each event								
Organization:	Main Email: Main Contact Phone:								
Main Contact:									

Event Name/Ty	pe:								
Event Dates:									
Start Time/End Time/	/Per Day:								
Number of Gam	ies:								
Number of Teams/Par	ticipants:								
All Locations Required Arenas- <i>How Many</i> , Lot	-								
Number of Tabl	les:					l		Number of Chairs:	
Other Equipment Re	quested:								
			** tab	les/chairs	are subj	ect to av	ailabili	ty **	
Alcohol:	Yes	No							
Vendors:	Yes	No							
Outdoor Events:	Yes	No							

User groups and CVO's will be required to provide resistration numbers and residency percentage of their members. Requests for special events are to be submitted with the annual allocation request on a separate form. All groups are responsible for SOCAN and RESOUND fees for their activities.

All groups are required to provide liability insurance naming the City of Beaumont as an additional insured at the time the allocation request is made. Rental fees will be approved annually by council according to the fees and charges bylaw.

Personal information is being collected under the authority of Section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act and will be used for the administration and management of the City of Beaumont's Recreation Facility bookings. If you have any questions about the collection or use of your personal information, contact the CIty of Beaumont's FOIP Coordinator at 5600-49th Street, Beaumont, Alberta, T4X 1A1 or 780.929.8782.

User Group Signature

Role

User Group Printed Name

Date