



Rules and Regulations Governing
City Owned Indoor Facilities and Rooms
Application for Use

City Council Approved 06.13.05

PO Box 1199, Kannapolis, NC 28082-1199
Phone: (704) 920-4343; Fax: (704) 920-4342; Email: awingler@cityofkannapolis.com

Facility or Room Requested: Today's Date/Time:

Date Requested: Time Reserved: Begin: End:
(Set-up and Take Down Time must be included)

Event Contact Person: Group /Organization:

Address: Home Telephone:

City/State: Cell Phone:

Name(s) and Telephone Number(s) of Chaperone(s) if applicable:

Type of Activity: Number of People Expected:

Name of Band or D.J.: Name of Caterer:

Beer: Wine: Champagne: Spirituous Liquor: Permit#
(Limited Special Occasion Permit Required to Serve spirituous liquor, ABC Commission Raleigh, NC)

Set up Instructions:

Equipment needed:
(please refer to list of equipment available)

Equipment fee(s): Equipment Total:

Security Deposit: Room Rental Fee: Kitchen Rental Fee:

Rent Total: Rent Paid: Balance Due: (14 days before use):

Smoking anywhere inside the building is prohibited.

I hereby certify that I am the authorized and responsible representative of the petitioning group. The above statements are true to the best of my knowledge. I have read a copy of the policies governing the use of the facility, and agree that our group will comply with the rules and regulations, policies and fee schedule governing the use of the facility. I also agree that all rent and fees shall be paid by the above due date (14 days before scheduled event) or confirmed reservation shall become void.

Date: Name (Print):

Signed: (Identification Required)

Address: Phone:

City/State: 2nd Phone:

Approval of Kannapolis Recreation Department:

Date: Fee Received:

Date: Fee Received: