

Application

PUBLIC WORKS SERVICE CENTER
400 Busse Highway
Park Ridge, IL 60068
847/318-5240

Please type or print. Complete a separate form for each date requested.

Name of Group _____

Requested Date _____ Requested times _____

Size of Room Requested LARGE (Capacity 80 people) _____ SMALL (Capacity 50 people) _____

Presiding Officer/Title _____

Name of Applicant _____

Address _____

Phone _____ Fax _____

Type of Meeting or Program _____

Purpose and Function of Organization _____

Special Instructions for arrangement of room _____

Estimated Attendance _____

PLEASE REMEMBER THAT THE MEETING ROOM HAS A FIRE CODE LIMIT ON THE NUMBER OF PEOPLE ALLOWED. AS THE APPLICANT, YOU ARE RESPONSIBLE FOR MAINTAINING THIS LIMIT. IF A STAFF MEMBER BELIEVES THAT THERE ARE MORE PEOPLE IN THE ROOM THAN ALLOWED, YOU WILL BE ASKED TO DO A HEAD COUNT AND WILL BE RESPONSIBLE FOR SEEING THAT THE CORRECT NUMBER OF PEOPLE LEAVE. YOUR EVENT CANNOT PROCEED UNTIL THE AUDIENCE SIZE IS WITHIN THE FIRE CODE LIMIT. NO FOOD OR DRINK IS ALLOWED IN THE CONFERENCE TRAINING ROOM. I AGREE TO COMPLY WITH THE RULES AND REGULATIONS OF THE MEETING ROOMS AND UNDERSTAND THE CITY IS NOT RESPONSIBLE FOR ANY MEETING-RELATED EXPENSES.

Applicant Signature _____ Date _____

+++++**FOR SERVICE CENTER USE ONLY**+++++

Date application received _____ By _____ Conflict _____ No Conflict _____

Application Approved Yes _____ No _____ Remarks _____

Signature _____ Date _____