



LOG PAVILION USER INFORMATION

ORGANIZATION OR GROUP NAME: _____

CONTACT NAME: _____

PHONE: (HOME) _____ (WORK) _____

(CELL) _____

EMAIL ADDRESS: _____

FACILITY USE DATE(s): _____

WHAT TYPE OF FUNCTION IS THIS? _____

HOW MANY PEOPLE DO YOU EXPECT TO ATTEND? _____

Approx. how many of your guests will travel from outside of Grays Harbor? _____

Approx. how many guests will be staying in a hotel? _____

FACILITY USE TIMES: Set-up _____

Actual Event _____

(Please include starting time and ending time)

Will you be serving **ALCOHOL**? _____

If **YES**, please fill out the following:

Will you be **SELLING** or **SERVING** alcohol? Who will be providing alcohol? _____

(Please circle one or both)

**If yes, a WSLCB permit and \$1million liability insurance are required Date received: _____

Insurance Provider Name: _____

Will you need the portable bar? _____

Will you be hiring a DJ? _____

Do you need the PA System & Microphone? _____

Plug&Play/AUX? _____

Do you need the Television? _____ Podium? _____ Screen? (must provide your own projector) _____

Need the kitchen equipment? _____ Who will be preparing/serving the food? _____

WHAT ARE YOU USING FOR DECORATIONS?

Office Use ONLY: _____

Please return this form with your application
Aberdeen Parks & Recreation, attn: Austin Weber
200 E. Market Street
Aberdeen, WA 98520
(360)537-3248

Checks made payable to: City of Aberdeen