



City of Glendale, Community Services & Parks
Facility Permit Application

Facility: _____

Agency/Applicant Name: _____

Agency Address: _____

City/Zip: _____ **Phone:** _____

Authorized Agent: _____

Agent's Address: _____

City/Zip: _____ **Phone:** _____

Name of Event: _____

Purpose of Event: _____ **Admittance Fees:** _____

Date(s) Requested: _____

Set-Up Time: **From:** _____ **To:** _____

Program Time: **From:** _____ **To:** _____

Clean-Up Time: **From:** _____ **To:** _____

No. in Attendance: _____

Equipment to be brought into facility (fencing, generators, tables, stages, booths, etc) :

Types of Booths: _____ **Number of Booths:** _____

Entertainment: _____

Office Use Only

Date Submitted: _____

Approved: _____