

CANMORE SENIORS ASSOCIATION
HALL RENTAL INQUIRY

RENTER/GROUP NAME _____

CONTACT INFORMATION

NAME _____

PHONE _____

EMAIL _____

MAILING ADDRESS _____

DATE REQUIRED _____

TIME REQUIRED _____

TYPE OF FUNCTION _____

HALL REQUIRED:

CREEKSIDE _____

TOWNSIDE _____

BOARD ROOM _____

ACTIVITY ROOM _____

KITCHEN _____

COMMENTS:
