

# District #347-- Willmar Community Education

## Facilities Request Form



Please return to:

Willmar Community Education  
1234 Kandiyohi Avenue SW, Willmar, MN 56201

Phone (320) 231-8490

Email: [raetzmana@willmar.k12.mn.us](mailto:raetzmana@willmar.k12.mn.us)

Name of event: \_\_\_\_\_

Name of organization: \_\_\_\_\_

Description of event/activity planned: \_\_\_\_\_

Main contact person: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Type of organization:

- 501c3 Non Profit
- For Profit
- Other: \_\_\_\_\_

### Building(s):

- Roosevelt Elementary
- Kennedy Elementary
- Lakeland Elementary
- Willmar Middle School
- Willmar High School
- Jefferson Learning Center
- Willmar Arts and Education Center (WEAC)
- Other: \_\_\_\_\_

### Is there a fee to participate in or watch the event?

- No
- Yes / Fee amount \_\_\_\_\_

### Will you be serving food at the event?

- Yes
- No

### Type of facility preferred:

- Classroom
- Cafeteria
- Auditorium/Theater
- Gymnasium
- Athletic field: \_\_\_\_\_
- Pool with lifeguard
- Other: \_\_\_\_\_

Estimated number of participants: \_\_\_\_\_

**Equipment needed:**

\_\_\_ Tables (how many?) \_\_\_\_\_

\_\_\_ Chairs (how many?) \_\_\_\_\_

\_\_\_ Podium

\_\_\_ Internet access

\_\_\_ TV/DVD

\_\_\_ Overhead projector

\_\_\_ Projection screen

\_\_\_ Microphone/Sound System

\_\_\_ Other: \_\_\_\_\_

**Is this a one-time event?**

\_\_\_ Yes

\_\_\_ No

**If no, on what days of the week?**

\_\_\_ Sunday

\_\_\_ Monday

\_\_\_ Tuesday

\_\_\_ Wednesday

\_\_\_ Thursday

\_\_\_ Friday

\_\_\_ Saturday

**How much time do you need for set-up and/or take down?**

\_\_\_ Set-up (minutes) \_\_\_\_\_

\_\_\_ Take down (minutes) \_\_\_\_\_

**Start Date (mm/dd/yy):** \_\_\_\_\_

**End Date (mm/dd/yy):** \_\_\_\_\_

**Event start time:** \_\_\_\_\_

**Event end time:** \_\_\_\_\_

**Additional information:**

**Please allow 10 business days for request to be processed.**

***For office use only***

Date received: \_\_\_\_\_