



Activities and Events

DATE of Request ___/___/___

Schedule Request

1. Fill out form
2. Return completed request form to POA Office (in clubhouse)
3. The completed request will be reviewed for approval
4. When approved, the schedule/calendar will be updated, and you will be notified.

Requestor Name: _____ **Site #:** _____

Requestor Phone #: _____ **email:** _____

Check all appropriate boxes:

Request is for: ☐ **Activity** (Activity is occurring over a period of multiple days/times.)

☐ **Event** (This is a one-time single event)

Activity or Event Name: _____

Requested Room: ☐ Great Room ☐ Card Room ☐ Pool House ☐ Kitchen ☐ Other _____

Requested Day(s): ☐ MON ☐ TUES ☐ WED ☐ THURS ☐ FRI ☐ SAT ☐ SUN

Requested Date(s): Start Date: ___/___/___

Start Time: _____ AM/PM

End Date: ___/___/___

End Time: _____ AM/PM

- Use reverse side to add all additional information you would like to include.
- Contact Deb Owen-217-821-8777 or Diane Newberry-815-258-8769 with questions.

Approved _____ **Calendar Updated** _____ **Schedule Updated** _____



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