

## COMMUNITY EVENT APPLICATION

Date of Event:			
Date submitted:			
Contact name:		-	
Group Name:			
Phone:			
Describe the event or	promotion in detail (includ	ding date, time, venue, etc)	2
Please list all parties	involved with the event (in	dividuals, organizations, m	edia, etc.):
	ou plan to promote the eve lic relations (agency or in-h		ochures/flyers, signs/banners,
Will the Jonathan's Pl	ace name and/or logo be ι	ısed? If yes, how?	
Please include any ot	her pertinent information t	hat may be helpful to us.	
Why did you choose J	onathan's Place as your be	neficiary?	
What are your expect	ations of Jonathan's Place?	P Do you need us at your ev	ent? If so, what is the event attire?
Are you requesting a .	Jonathan's Place represent	ative attend your event?	Yes or No
Your Signature:		<del> </del>	Date:
Authorization Signatu (JP Use Only)	ıre:		Date:







