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## *Special Event Request*

Requesting Association \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Contact Person \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Name of Event \_\_\_\_\_

Type of Function \_\_\_\_\_

Event Date/Date Range \_\_\_\_\_ Time \_\_\_\_\_

Location \_\_\_\_\_

Description \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date Submitted

*Hockey Manitoba Use Only*

Approved by \_\_\_\_\_

Date \_\_\_\_\_