Open form in Adobe Reader to use the Submit by Email button.

RENTAL REQUEST FORM

1
Panorama
RECREATION

CONTRACT #: FA	-		□ 1	□ 3 □ 5	Don	oromo	
DATE:		ADMIN U	SE 2	4 6	PUI RECI	UIUIIIU REATION	
USER INFORMA	ATION						
ORGANIZATION:		CONTACT NAME:					
ADDRESS:		CIT	Υ:		POSTAL COD)E:	
PHONE:		E-N	ЛАIL:				
ALTERNATE CONTACT IN	FORMATION:						
FACILITY BOO	KINGS						
EMAIL: info@panora	marec.bc.ca						
Panorama Recreati	on Centre Greenglade	e Community Centre		<u> </u>	North Saanich Mid	idle School	
Arena Concourse	Room Room 5 -	Small Fitness Studio	Sports F	-ield	Multipurpose Ro	om Full 1/2 or 1/	
Boardroom	Room 6 -	Classroom	Basebal	ll Field	Gymnasium Full	Half	
Island Room	Gymnasi				Science or Textile	es Room	
Poolside Room	9	Central Saanich Cultu				listed here (w/ Mgmt Pri	
Parking Lot		Room A Roo	om B	Appro	oval). List location:		
CENTENNIAL PA	RK BOOKINGS						
EMAIL: Kristine Tamb	urri at info@panoramarec.b	c.ca	Fieldhouse	Picnic Shel	ter 1 2	3	
POOL BOOKING	5						
EMAIL: Martin Hende	rson at mhenderson@panor	ramarec.bc.ca					
ARENA BOOKING	GS						
EMAIL: Ryan Smith at	rjsmith@panoramarec.bc.c	a					
Arena A		Arena B					
Arena A (Ice)	Arena A (Dry Floor)	Arena B (Ice)	☐ Arer	na B (Dry Floor)			
PURPOSE & DA	TE OF REQUEST						
PURPOSE OF RENTA	L:		# OF PARTICIPANTS:				
					# OF SPECTATORS	5:	
AGE / GROUP:	☐ Age 18 Years & Younger	Age 19 Years & C	older 🔲 (Commercial Use	e 🔲 Birthday	/ Party	
DAY/S REQUESTED:	□ M □ Tu □ W □ T	h □ F □ Sa □Su	то	□M □Tu [□ W □ Th □ F	Sa Su	
DATE/S REQUESTED: YYYY/MM/DD		то	TIM REC	IE Quested:	АМ П то	AM PM	
LIABILITY/INS	URANCE- Proof of in	surance required	d for all re	entals.			
		<u> </u>					
•	urchased online through	instantkisk crd.insta	ntriskcover	age.com/logii	า		
ADDITIONAL R	EQUESTS						

^{*}ACKNOWLEDGEMENT - All facility rental requests require two weeks notice. Your rental contract MUST BE SIGNED & insurance in place within 14 days and the RENTAL FEE PAID as per contract to confirm the booking. Failure to comply will result in the loss of the booking date & payment.

^{*}Notice of cancellation must be received 10 days prior to the event for facility room rentals to receive a full refund.

^{*}NSMS bookings are subject to mandatory CRD/Panorama supervisory staffing requirements. Additional fees will be applied.

^{*}Please contact Reception at 250-656-7271 to make your payment or address any questions.

^{*}ADMIN LEGEND - 1-Signature 2-Insurance 3- Payment 4-Mgmt Approval 5-File 6-Keys Issued