



**APPLICATION**  
 to use the  
**CITY OF SARNIA - COMMUNITY SUITE**  
 at the  
**RBC CENTRE**  
 1455 LONDON ROAD, SARNIA, ONTARIO

<b>CATEGORY</b> Please Indicate [ ]	<b>REGISTERED CHARITY</b>	<b>CHURCH</b>	<b>SCHOOL</b>	<b>SERVICE CLUB</b>	<b>CITY BASED</b>
					<b>COUNTY BASED</b>
<b>LEGAL NAME OF ORGANIZATION</b>					
<b>STREET ADDRESS</b>				<b>P.O. Box [If Any]</b>	
<b>CITY</b>				<b>Postal Code</b>	
<b>CONTACT PERSON</b>				<b>Position</b>	
	<b>Address</b>			<b>Postal Code</b>	
	<b>Phone</b>		<b>E-mail</b>	<b>Fax:</b>	
<b>GROUP DESCRIPTION</b>  <i>In the space provided, please describe important characteristics of your group.</i>  <i>For example: The purpose of your group, membership composition, service area, etc.</i>					
<b>HISTORY AND OVERVIEW OF GROUP</b>  <i>In the space provided, please describe the history of your group, and a description of your group's activities such as fundraising, community activities, other.</i>					
<b>ADULT GROUP MEMBERS TO BE RESPONSIBLE</b> [please print]  <i>[NB. Use of the suite requires that suite users, at all times, ensure compliance with the rules and regulations ]</i>	<b>Name</b> _____		<b>Phone</b> _____		
	<b>Address</b> _____				
<b>LIKELY PURPOSE</b>  <i>Please indicate with a [ ] on the line provided or describe the other purpose in the space provided.</i>	<b>Fund Raising</b> _____		<b>Other Purpose [please provide a brief description]</b>		
	<b>Receiving organization (ie. Cancer Society)</b>				
	<b>As a thank you for a Volunteer committee Member or staff</b> _____				

Once all applications are received, an approval process will be undertaken to ensure all groups satisfy the suite policy criteria. Approved groups will be divided between fund raisers and use by the group. Fund raising dates will be later in the year to allow time to organize the lottery. Groups will be notified of their date and procedure.