



CITY OF BANGOR
PARKS & RECREATION

COMMUNITY SERVICE APPLICATION

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Organization Type: <input type="checkbox"/> Corporations <input type="checkbox"/> Non-Profit <input type="checkbox"/> Government / Educational <input type="checkbox"/> Voluntary <input type="checkbox"/> Other _____	Name of Organization: _____ Location/Park: _____ Proposed Date (s): _____ Proposed Time: _____ # of Attendees: _____ (Approx.) <input type="checkbox"/> Youth <input type="checkbox"/> Adult
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Please describe what will be happening at this event:

Contact Information:

Organization/Business Name: _____
 Address: _____ City: _____
 Contact Name: _____
 Work Phone: _____ Cell Phone: _____
 E-mail address: _____

Contact Info II:

Contact Name: _____
 Work Phone: _____ Cell Phone: _____
 E-mail address: _____

OFFICE USE ONLY: DAY OF VOLUNTEER EVENT:

Notes, Equipment & Materials Needed		
> _____ > _____ > _____ > _____	<input type="checkbox"/> Approved / Initials: _____ Date: _____ <input type="checkbox"/> In MyRec Calendar <input type="checkbox"/> Maintenance Acknowledged	