

Riverside Township

27 Riverside Road – Riverside, IL 60546

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Vera A. Wilt, Supervisor

Room Request – Standard Use Application

Today's Date: _____

Organization: _____

Contact Person: _____

Address: _____

Phone/Cell: _____ E-mail: _____

Event Date(s): _____

Day of the Week: _____ Time - From: _____ To: _____

This Is A (circle one): One Time Event Weekly Meeting Monthly Meeting

Reason For Request: _____

Room Setup Request (please use backside of this sheet for any necessary diagrams): _____

of Expected People: _____ Room (circle): 3 4 22 Auditorium Kitchen 30

Name of person responsible for locking the front doors (per rule 13): _____

Phone/Cell: _____ E-mail: _____

I have read the Township Building Use Policies, Procedures, Rules & Regulations and agree to them.

Signature: _____ Date: _____

FOR OFFICE USE ONLY

Standard Use Application Approved By: _____

Date: _____