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THIS FORM MUST BE COMPLETED IN FULL AND SUBMITTED WITHIN 72 HOURS PRIOR TO THE EVENT ATTENTION REBECCA YOUNG AT THE ODHA OFFICE BY EITHER EMAIL COMM@ODHA.COM OR BY FAX (613) 224-6079.

SPECIAL EVENT REQUEST

Requesting Association/Team:	Contact Person:
Telephone (Home)	Telephone (Work)
Cell:	Email:

Name of Event:	Type of Function:
Date(s) and Time(s) of Function:	Location:
Address:	

Description of Event:

Amount of liability coverage required \$2,000,000.00

Applicants Signature

Date Submitted

ODHA OFFICE USE ONLY

Date Received

ODHA Executive Director

If more space is required for description of event, please use another sheet.