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## Application for Use

Acceptance of this application by the Sorenson Unity Center does not constitute approval or space availability. Space is not considered reserved until an apported Agreement is completed and signed.

Name of Event:		Expected attendance:
Applicant:		
Organization Type:		
For-Profit Business Individual	SLC Department/Division	Glendale/Poplar Grove Resident
Non-Profit - 501(c)3 ID#:	Other:	
Mission:		
Contact name:		Email:
Address:	City, State:	Zip Code:
Alternate contact:	Phone:	Email:
Describe event/meeting/programming:		
	_	
Type of event: Private event or closed meeting Public event or open meeting		
Date and time requested:	Event details:	
Date (s):	Admission will be cha	arged OR items/services be available for sale
Setup starts:	Class/Workshop/Trai	ning/Presentation
Event starts:	Performance	
Event ends:	Food or drinks served	j
Cleanup ends:	Other:	
Alternate or additional date (s) if applicable:		
Space requested:	Equipment requeste	d:
Meeting Room Gallery	Chairs: #	
Black Box Theater Other:	Tables: #	Other:
Comments:		
Date of application: Applic	cant signature:	
OFFICE USE ONLY		
Approved? YES NO Date: Notes:		
Calendared by: Date:	Unity staff contact:	Actual attendance: