

**Albert J. Hamilton Post 7
The American Legion
Bellingham, Washington 98226
(360) 734-3110**

POST 7 FACILITIES USE REQUEST FORM

TO: Post 7 Adjutant

FROM: Post 7 Legion Post 7 SAL Activities Committee
 Post 7 Auxiliary Post 7 Riders Other: _____

DATE OF REQUEST: _____

We request the use of the following Post 7 facilities:

Main Hall Barbeque Area
 Kitchen Other _____

On _____, _____ from _____ to _____, for the below described event:
day of week date time start time end

Event: _____

Is this a recurring event such as Taco Night, etc? _____. *If yes, only one form need be completed at the beginning of each year. If the contact and or clean up person changes or band changes, please let the Adjutant know. List the recurring dates:* _____

Contact person for this event: _____ Phone: _____
Person responsible for clean up: _____ Phone: _____
Door greeter for this event: _____ Phone: _____

Door Greeter shall: be at entrance half hour prior to event; consume no alcohol while on duty, nor have any alcohol at the entrance; check members for current membership; guests must be with a post member and that member must sign for the guest; ensure that no alcohol is consumed outside the front door or in the parking lot; keep smokers 25 feet from building entrances.

Will there be a band or other entertainment? ____ Yes ____ No

Name of band or entertainment: _____
Contact person from the band or entertainment: _____ Phone: _____

Are there any special requests of the Post (early bar opening, extended bar hours etc.)? Note: there may be a charge for special considerations.

Adjutant Approval and comments: _____ Date: _____
 Computer calendar noted; Bar calendar noted