



**APPLICATION FOR USE / EVENT SHEET**

1383 South 900 West, Salt Lake City, Utah 84104  
(801) 535- 6533 [www.sorensonunitycenter.com](http://www.sorensonunitycenter.com)

This application must be filled out completely. Please read all of Policies and Procedures thoroughly.  
**Space is not considered reserved until an approved Rental and/or Use Agreement is completed and signed.**

Name of Event: \_\_\_\_\_ Expected attendance: \_\_\_\_\_  
(Note: events of 500 or more people require a Temporary Mass Gathering Permit)

**Date(s) requested:** \_\_\_\_\_  
Set-up Starts: \_\_\_\_\_  
Event Starts: \_\_\_\_\_  
Event Ends: \_\_\_\_\_  
Clean up Ends: \_\_\_\_\_

Private - Closed to the public       Public - **FREE and open to ALL**  
 Class/Workshop/Training/Presentation       Performance  
 Other \_\_\_\_\_

Will admission be charged OR items/services be available for sale?  
 YES       NO

**Organization/Individual Name:** \_\_\_\_\_

Address \_\_\_\_\_ City/State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Check one:**     Non-Profit Organization     For-Profit Business     Salt Lake City Department/Division  
 Glendale/Poplar Grove Resident     Individual     Other \_\_\_\_\_

**Area(s) requested**     Full Facility     Performance Theater     Main Lobby/Gallery     East Grounds/Pavilion  
 Art Room     Meeting Room \_\_\_\_\_    Other \_\_\_\_\_

**Food Served?**  No  Yes    **Alcohol?**  No  Yes    If caterer Yes, name/phone: \_\_\_\_\_  
If food is served at a public event, a professional caterer, paid for by applicant is required. If alcohol is served multiple regulations apply.

**Equipment / Services Requested:**     Set up by Organizer     Set up by Unity Staff (setup fee applies)  
 Chairs #                       Chair Risers     Theater A/V     Popup Canopies # \_\_\_\_\_  
 Tables #                       Stage             Podium             Portable Audio

**Equipment/Services Notes (attach layout diagrams if needed):**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Application: \_\_\_\_\_ Actual Attendance \_\_\_\_\_

Office Use Only:    Approved    YES    NO    Notes \_\_\_\_\_

Contacted: \_\_\_\_\_ Date: \_\_\_\_\_ by: \_\_\_\_\_ Notes \_\_\_\_\_

Calendared by \_\_\_\_\_ Event Sheet Confirmed by: \_\_\_\_\_ Circle one: Programming Partner    Rental rev 6/7/17