westlakechurch

6696 Rockville Road
Indianapolis, IN 46214
(317) 241-9451

OUTDOOR FACILITY USE

_____ would like to request the use of the
(Person's name OR Name of Organization)

_____ Shelter House

Date needed _____ Time: _____ to _____

_____ Softball Diamonds

Date needed _____ Time: _____ to _____

_____ Other (please specify _____

_____

Date needed _____ Time: _____ to _____

Requesting party signature _____

Address _____

Phone _____ Today's Date _____

☑☑

Westlake staff signature _____

* Must be signed by a staff member