



## COMMUNITY GRILL REQUEST FORM

### ORGANIZATION INFORMATION

Organization Name \_\_\_\_\_ Contact Person \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

\_\_\_\_\_ FAX \_\_\_\_\_

\_\_\_\_\_ E-mail \_\_\_\_\_

Tax-exempt Number (**required**): \_\_\_\_\_

Mission of Organization: \_\_\_\_\_

### REQUEST FOR USE OF GRILL

*KUA will consider requests of those community organizations who are fulfilling their mission, enhancing their operations and/or raising funds to benefit the organization.*

For what event are you requesting use of the grill? \_\_\_\_\_

Expected attendance \_\_\_\_\_

How do you plan to use the grill? \_\_\_\_\_

What is the location of the event? \_\_\_\_\_

What is the **date and time** of the event? \_\_\_\_\_

Drop off time: \_\_\_\_\_ Pick up time: \_\_\_\_\_

Emergency contact person and phone number (preferably cell phone): \_\_\_\_\_

Identify any special factors which should be considered when making final decisions. \_\_\_\_\_

**Signature** of Contact Person \_\_\_\_\_ Date \_\_\_\_\_

**Please attach copy of  
Equipment Use Agreement/Waiver of Liability,  
Certificate of Liability Insurance,  
and map showing location for grill delivery.**

**Email, fax or mail completed form to:**  
E-mail: [thebiggrill@kua.com](mailto:thebiggrill@kua.com); FAX - 407-933-1761  
Mail - Kissimmee Utility Authority, Attn: Corporate Communications,  
1701 W. Carroll Street, Kissimmee, Florida 34741