

Please read the No-Fee Community Activations Booking Guidelines available on <u>One-Time Booking of Parks and Recreation Facilities</u> before completing your application. For questions or support, call Client Services at 416-396-7378 or visit <u>One-Time Booking of Parks and Recreation Facilities</u>.

Applicant Type								
Please select one.								
☐ Registered charity	/							
☐ Not-for-profit orga	□ Not-for-profit organization							
☐ Unincorporated community group, association or collective								
☐ Individual								
Charities/not-for-profits the following sections.	: provide organi	zational information (e.g. organizational a	nddress, phone r	number and email) in			
Applicant Contact	t							
The Applicant Conta the main point of co					rm and will serve as			
First Name			Last Name					
☐ Check this box if F Certificate or Chan		ast name do not appl tificate bearing a Sin						
Single Name								
Organization Name (if	applicable)							
Street Number	Street Name				Suite/Unit Number			
City/Town		Province		Postal Code				
Mobile Number		Email Address						



Activity Contact

The Activity Contact is the person responsible for supervising the activities in-person on the day of the booking. This person must be onsite during the activity, be reachable by phone, and have a copy of the booking/permit with them. The Activity Contact does not have to be the same person as the Applicant Contact.

		ne Applicant Contact. If not checked, the Activity Contact e of Collection at the end of this form.		
First Name		Last Name		
		ly to you because you have either a registered Birth gle name. Provide your name in the next space.		
Single Name				
Mobile Number	Email Address			
Park Information				
Attach a site map identifying the lo	ocation and layou	it of your activity.		
Park Name				
Park Address				
Location within the Park				
Activity Date and Attendance				
Activity Date (yyyy-mm-dd)		Expected Total Attendance		
Start Time, including set-up (hh:mm)		End Time, including clean-up (hh:mm)		

Activity Types						
Select all that apply.						
☐ Arts and crafts	☐ Park clean-up	☐ Workshop				
☐ Board games or cards	☐ Social gathering	☐ Yoga or fitness activity				
☐ Ceremony	☐ Tai chi					
☐ Lawn games	☐ Talk or information display					
☐ Meditation	☐ Walk or tour with meet-up					
☐ Other (please specify)						
Activity Description						
Briefly describe your activity.						
Activity Factures						
Activity Features Number of Tents Maximum two 10	0 ft x10 ft (3 m x 3 m) tents, weighted	not staked				
Transor or Forto. Waximan two 1	The Art of the Committee of the Committe	iot otaliod.				
Amplified sound equipment (select	t all the apply or leave blank if not app	licable)				
☐ One battery powered microphone						
☐ One battery powered speake	r					
Food (select all the apply or leave	blank if not applicable)					
Eligible Food: Food that is offered to participants must be sealed, pre-packaged, individual serving food from an inspected location such as a grocery store or licensed restaurant. The food must be ready-to-eat (i.e. does not require onsite preparation such as washing, cutting, handling, portioning, assembly, cooking or heating). Food must be free and cannot be sold.						
☐ Participants will bring their own food for personal consumption						
☐ Eligible food will be offered to participants (please specify):						
Giveaway						
☐ Check this box if your activity includes a giveaway. Describe the giveaway item:						

Insurance	
For charities and not-for-profit organizations	
If your booking is approved, you will be asked to provide a certificate of insurance provider listing the City of Toronto as an additional insured for the	
☐ I will provide a certificate of insurance.	
For unincorporated groups and individuals	
Insurance is only required for yoga or fitness activities. If applicable, you can insurance or purchase coverage from the City at an affordable rate.	bring your own
☐ My activity does not include yoga or fitness. Insurance is not required.	
☐ I will provide a certificate of insurance.	
☐ I will purchase insurance from the City. (Client Services staff will follow-up to process y	your purchase.)
Signature	
I have reviewed, understand and agree to adhere to the Booking Guidelines.	
☐ I attest that all information in this application form is true and that my p free and open to the public.	proposed activities will be
☐ I understand that City staff may call and/or visit the Activity Contact du ensure compliance with the Booking Guidelines and to support the eva program. I agree that the Activity Contact will have a physical or digital booking/permit and will be available to speak to City staff.	aluation of this booking
□ I understand that failure to comply with the Booking Guidelines may re restrictions on future bookings with the City of Toronto, at the sole disc Manager of Parks and Recreation.	
Authorized Signature (If not a Legal Entity, the signature of individual(s) assuming personal responsibility)	Date (yyyy-mm-dd)

Submitting the Application

<u>Submit this application form and a copy of your Site Map</u> to Client Services online **at least three weeks** in advance of the activity.

Notice of Collections

Applicable to Unincorporated Community Groups and Private Individuals

Parks and Recreation collects personal information on this form under the legal authority of the City of Toronto Act, 2006, sections 7, 8, 136(a) and (c); the Toronto Municipal Code, Chapter 608, Parks, Article III, Parks Use, section 608-11 and Chapter 608, Parks, Article X, Regulation and Enforcement, section 608-49; and Item 2025.MPB27.1, City Council Decision 4,69 and 70, as confirmed by the City of Toronto By-law 108-2025. The information is used to administer this application for the use of City of Toronto facilities and for further communications with the applicants. Questions about this collection can be directed to Client Services, Toronto City Hall, 100 Queen Street West, 1st Floor, Toronto, Ontario, M5H 2N2 or by telephone at 416-396-7378.

Applicable to Incorporated Organizations

As stated in the Municipal Freedom of Information and Protection of Privacy Act, section 2(2.1) and 2(2.2), information collected on this form is considered business identity information. Business identity information could be publicly available and/or disclosed upon request, unless an exception applies.