

### Edgewood Community Center Building Request Form

Requested Date:	Name of Event:	Which rooms are you Requesting?
Name of Group:		
1. Contact Person Name & Email or Phone:		2. Contact Person Name & Email or Phone:
What type of event will this be?		Have you Toured our facility?
Start time(s):	End Time (s):	
Number of attendees:	User Age Range:	

**Please send this form to:**

Edgewood Community Center  
Attn: K Payne  
6852 Market Ave. N  
Canton, Ohio  
44721

Requests may take up to 7 days to review.