



# Parsippany PAL Rental Request

Organization Name: \_\_\_\_\_

Organization Address: \_\_\_\_\_  
(must match COI)

Contact Person Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Brief Description of event:

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Estimated amount of people: \_\_\_\_\_

Will there be alcohol at your event?: \_\_\_\_\_

\* Includes BYOB, selling or providing at your event.

Event Date Preference: \_\_\_\_\_

\* If you don't have a specific date you are requesting, please put the preferred day of the week.

Actual event start and end time: \_\_\_\_\_

Set up start time: \_\_\_\_\_

Break down end time: \_\_\_\_\_

How many tables do you need? \_\_\_\_\_ Chairs? \_\_\_\_\_

**Please submit your request to the main office or via email to [info@parsippanypal.org](mailto:info@parsippanypal.org). All requests must be submitted at least 7 days prior to the first event date. Please allow 2 business days for a response.**