



FACILITY RENTAL APPLICATION

Your Name: _____ Today's Date: _____

Agency/Organization: _____

Are you a pumper in the WRD Service Area? (Circle one) YES NO

Email Address: _____ Phone Number: _____

Facility Requested: _____ Room Requested: _____

Date: _____ Time: _____

In a few words, describe your event:

How many people are you expecting at your event? _____

*Please note, submitting this form does not guarantee availability. Please submit a completed form to Angelina Mancillas at Amancillas@wrd.org. Call (562) 275-4231 for more information.