

Dear Building Manager,

1. Request use of the following armory: _____.

2. General Information.

a. Dates Desired: (Dates) _____; (Times) _____.

b. Name: _____.

c. Address: _____.

d. Telephone Number: (_____) _____.

e. Sponsored by: _____.

f. Nature of Sponsor (Non-profit, profit corp., family group, friends, etc.)
_____.

g. Type of activity: _____.

h. **Hazardous materials involved?** _____ **(Yes);** _____ **(No).**

i. Activity for profit? _____(Yes); _____(No).

j. Minors Involved? _____(Yes); _____(No).

k. Estimated Number Of Participants: _____.

3. Competition.

- Proof of no competition or proof of inability to pay? _____(Yes); _____(No).

4. Insurance.

a. Insurance for at least \$500,000.00 that names the State of Wyoming as an additional insured? _____(Yes); _____(No).

b. Request waiver for insurance? _____(Yes); _____(No).

5. Deposit.

a. Will provide a deposit in the amount of \$150? _____ (Yes); _____ (No).

b. Request waiver for deposit? _____(Yes); _____(No).

6. Agreement & Hold Harmless.

a. Willing to sign the Use Agreement (to be provided): _____(Yes); _____(No);

b. If a physical activity is involved, willing to ensure that all participants sign the Sign In Sheet (to be provided) _____ (Yes); _____(No);

c. If physical activity with minors involved, Minor Hold Harmless (to be provided) signed by all parents? _____(Yes); _____(No).

Signature Date

Building Manager Use Only:

1. Proof Of Insurance: _____(Attached); _____(Waived—by approval of the Deputy Military Administrator).

2. Damage Deposit: _____(Amount & Check #); _____(Waived);

3. Agreement & Hold Harmless: _____(Signed & Attached).

4. Your request for use of a Wyoming National Guard armory on the above dates is:
APPROVED / DISAPPROVED

5. If disapproved, reason for disapproval (**consider whether use will damage armory or expose armory to hazardous materials**): _____
_____.

Building Manager Signature Date