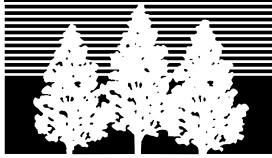


ROBERT W. DEPKE



# WARREN TOWNSHIP CENTER

17801 W. Washington Street  
Gurnee, Illinois 60031  
Phone: 847-244-1101  
Fax: 847-244-2822

**Suzanne D. Simpson**  
*Supervisor*

**George Iler**  
*Clerk*

**Amy L. Sarver**  
*Highway Commissioner*

**Charlie Mullin**  
*Assessor*

**Donna L. Radke**  
*Trustee*

**Bill Gill**  
*Trustee*

**Kenneth B. Echtenacher**  
*Trustee*

**Mike Semmerling**  
*Trustee*

## Warren Township Facilities Application

Warren Township has enacted the following policy for all Commercial/Not-for-Profit groups of five (5) or more wishing to use township facilities. Groups will be required to demonstrate proper staff to group ratios, methods used for group identification, and a Certificate of Insurance naming Warren Township as an additional insured.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

Address: \_\_\_\_\_

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

Fax: \_\_\_\_\_

Name of Group (Identity): \_\_\_\_\_

Number of Staff: \_\_\_\_\_ Number of Non-Staff: \_\_\_\_\_  
Maximum group size of thirty (30)

Date	Morning			Afternoon		
	9—10	10—11	11—12	12—1	1—2	2—3
Please choose one (1) hour total per visit each month						

Monday through Friday Only

Please allow two (2) weeks for processing before your requested visit.

Maximum use: one (1) group visit per month.

**FOR OFFICE USE ONLY**

By: \_\_\_\_\_ Date: \_\_\_\_\_

**Approval:**  
 Accepted  
 Denied

**Certificate of Insurance:**  
 Yes \_\_\_\_\_  
 No \_\_\_\_\_  
 On File