

Laois Shopping Centre Charity Application Form



Charity Information

Name	
Charity Number	
Address	
Phone	
Website	

Contact Information

Name	
Phone	
Email	

Event Information

Date	
Description	
What is required ? <i>please indicate what facilities you need on the day</i>	<input type="checkbox"/> Mall Space <input type="checkbox"/> Car Par Space <input type="checkbox"/> Out Door Space <input type="checkbox"/> Power Supply <input type="checkbox"/> Water supply <input type="checkbox"/> Poster space <input type="checkbox"/> Other