

# The 519 Church Street Community Centre Space Use Application

Please complete this form and return it to the **Office Manager** at The 519 Church Street Community Centre, 519 Church Street, Toronto, Ontario, M4Y 2C9. (416) 392-6878 x 102. Be concise, but if you need additional space, feel free to continue your answers on the back of the form.

## Group name and contact information

1. Name of Group or Activity: \_\_\_\_\_

2. Contact people: *Two contact people must be identified for this application to be considered.*

Contact Person # 1:

Contact Person # 2:

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

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

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

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

\_\_\_\_\_ City: \_\_\_\_\_

\_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone: (h) \_\_ (\_\_\_\_) \_\_\_\_\_

Phone: (h) \_\_ (\_\_\_\_) \_\_\_\_\_

Phone: (w) \_\_ (\_\_\_\_) \_\_\_\_\_

Phone: (w) \_\_ (\_\_\_\_) \_\_\_\_\_

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

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

email: \_\_\_\_\_

email: \_\_\_\_\_

Position in group: \_\_\_\_\_

Position in group: \_\_\_\_\_

2. Group mailing address if different from above: \_\_\_\_\_  
\_\_\_\_\_

3. Group Web Site: \_\_\_\_\_

## Group Structure and Activities

5. Is this group:     Established     New endeavor     Chapter or branch of another group

4. Is your group/activity open to new members?     yes     no

5. Explain membership criteria, if any: \_\_\_\_\_  
\_\_\_\_\_

8. Briefly describe the goals and objectives of your group: \_\_\_\_\_

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6. Briefly describe what a meeting or activity would include: \_\_\_\_\_

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7. How do participants have input into how the group is run? \_\_\_\_\_

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8. The 519 has defined categories for free use of space. Choose **one** category that best describes the activities of your group:

Programme Group Categories (main activities take place at The 519)

- On-site Recreation
- Self Help and Peer Support
- Community Service
- Education

User Group Categories (organizational meetings at The 519, activities take place off-site)

- Off-site Recreation
- Social Change/Social Activist
- Off-Site Community Service
- Professional Assoc. or Union
- Tenants' Group or Housing Co-op
- Political Party
- Community Fundraising Organization

9. Does your group work to provide religious or spiritual education or practices?  yes  no

10. Does your group provide health service or health education?  yes  no

## The 519's policies and your group

11. The 519's Mission statement reads as follows: "The 519 is a meeting place and focus for its vital and varied downtown community. Within a supportive environment, it responds to community issues and needs by supplying the resources and opportunities to foster self-determination. It is committed to the principles of accessibility, voluntarism, individual dignity and value, participation and celebration."

How will your group help The 519 fulfill its mandate? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

12. At The 519, discrimination on the following grounds is prohibited: Age, Marital Status, Number of Dependents, Political Affiliation, Sex, Sexual Orientation, Gender Orientation, Race, Ethnic Background, Colour, Creed, Citizenship, Physical or Mental Handicap, Membership in a Collective Bargaining Unit, or any other factor that is a violation of fundamental human rights.

The 519 serves diverse people in a busy downtown neighbourhood. Many activities serve particular segments of the community, such as homeless people, gay men, lesbians, bisexuals or transgendered/transsexual people, families with children, and people from a variety of religious and cultural backgrounds. Mutual respect between the people we serve is an essential component that all users of The 519 are expected adopt.

Will your group be able to respect The 519's policies as stated above?     yes                       no

## Incorporation and Finances

13. Is your group incorporated?                       yes                       no
- non-profit     co-operative                       sole proprietorship                       corporation
- other \_\_\_\_\_

14. Does your group have charitable status through Revenue Canada?     yes                       no

15. How is your group funded? \_\_\_\_\_

16. Will participants be charged a fee?     yes:    \$ \_\_\_\_\_ per \_\_\_\_\_                       no

Please check off the expenses that this fee is meant to cover:

- Membership info, such as a newsletter
- Materials fees
- Refreshments served at the meeting / activity
- Wages or salary for facilitator, group leader
- Other \_\_\_\_\_

20. It is a policy of The 519 that no individual be denied access to a group or activity because of their inability to pay. Can your group accommodate this policy?                       yes                       no

If no, please explain: \_\_\_\_\_

21. Does anyone receive compensation for their participation in the group?  yes  no  
If yes, who receives compensation, for what purpose, and how much do they receive?

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17. Are financial records maintained for your group?  yes  no

18. Would your financial records be accessible to The 519 for review?  yes  no

**Group meeting time request and preferences:**

19. Our group wants to meet:  occasionally  monthly  twice monthly  weekly

20. We hope to have space that is:  ongoing  
 seasonal (specify months) \_\_\_\_\_  
 time-limited until \_\_\_\_\_

21. Here are times that may be available within the schedule at The 519. Note that regular evening meetings are either 6-8 p.m. or 8-10 p.m., except in the case of special meetings and events.

**For weekday meetings, choose preferred days and time slots:**

Mondays  Tuesdays  Wednesdays  Thursdays  Fridays  
 mornings time: \_\_\_\_\_  afternoons time: \_\_\_\_\_  
 evenings  6 - 8 p.m.  8 - 10 p.m.

**For weekend meetings, choose preferred days and time slots**

Saturdays between noon and 5 p.m. Please specify time slot: \_\_\_\_\_  
 Sundays  10 a.m. - noon  noon - 2 p.m.  2 - 4:30 p.m.

22. How many people do you anticipate will be attending this group's meetings?  
 less than 15  16 - 40  41-75  75-250  \_\_\_\_\_

*Note that a request for a particular time does not guarantee that an appropriate room will be available at that time. When a group is approved we try to accommodate the group based on this request.*

*In certain circumstances, The 519 may book up to 2 meetings for a new group for the purpose of planning the group and completing the application. However, staff approval for initial meetings does not imply that the Board will approve this request for ongoing space.*

## Information for the Public

23. Once a group is approved and holding meetings at The 519, we must have a way to inform the public about your group. If someone inquires about joining your group, how would you like our front desk staff and volunteers to handle their request? Choose one of the following:

Give them the following name and contact number:

\_\_\_\_\_

Tell them when the next meeting is, and invite them to attend.

Give them the following address so they can write for more information:

\_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_

Other: \_\_\_\_\_

24. How do you plan to publicize your group? \_\_\_\_\_

## Agreement and Signature

We certify that we have given accurate information about our group, and our signatures below confirm our intent to abide by The 519's policies.

Contact Person # 1

Contact Person # 2

Signed \_\_\_\_\_

Signed \_\_\_\_\_

name (printed) \_\_\_\_\_

name (printed) \_\_\_\_\_

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

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

## This Space for Office Use Only

Full Name of Group \_\_\_\_\_

Group Code: \_\_\_\_\_ Group Category \_\_\_\_\_ Status \_\_\_\_\_ Board Meeting Date \_\_\_\_\_

Regular Meetings  yes  no Effective \_\_\_\_\_

Days \_\_\_\_\_ Times \_\_\_\_\_ Room \_\_\_\_\_

Letter sent date: \_\_\_\_\_  accept  conditional  reject

\_\_\_\_\_

\_\_\_\_\_