



GAY CALGARY OLDE TYME COUNTRY CARNIVAL

APPLICATION FORM

Name of Non Profit Group/Organization: _____

Contact Person: _____

Address: _____

City: _____ **Province/State:** _____

Postal/Zip Code: _____ **Telephone No: ()** _____

Email Address: _____

Description of Carnival Game/Activity:

Number of Tables and Chairs Requested: _____

Will you require assistance in renting a 10'x10' tent? _____

Applicant's Signature: _____ **Date:** _____

Applications forms can be mailed to: **ARGRA**
223 – 12 Avenue S.W.
Calgary, Alberta
T2R 0G9

Or emailed to: sponsorship@argra.org or
rodeodirector@argra.org

For more information please visit www.ARGRA.org