

**City of Woodbine
Website Calendar Event Request**

Name or Organization: _____ Date: _____

Contact Phone Number: _____

Event Title (25 Characters including spaces):

Event Description (100 Characters including spaces):

Fee for this event: _____ Email address: _____

Website for information: _____

Event Date(s): _____

Event Start Time: _____ Event End Time: _____

Signature: _____

* Please note: It could take up to 5 working days to post this to the Web Calendar*

For Office Use Only:

Date Received: _____ Initials: _____

Date posted to Web Calendar: _____

Signature: _____