

**IRPC**  
**Range(s)/Club House Use Request**

**Organization Name:** \_\_\_\_\_

**Authorized Person:** \_\_\_\_\_

**Contact Phone Number:** \_\_\_\_\_

**Contact Email Address:** \_\_\_\_\_

**Date(s)/Time of Event:** \_\_\_\_\_

**Range(s) Requested (\$50/day per range):** \_\_\_\_\_

\_\_\_\_\_

**Club House Requested (\$25/day):**            \_\_\_\_\_ Yes            \_\_\_\_\_ NO

**Other Requirements, if any:** \_\_\_\_\_

**Signature of Authorized Person:** \_\_\_\_\_

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**To Be Completed by IRPC Officer**

**Circle One: Approved or Denied by IRPC Members Via vote at Monthly Meeting**

**Monthly Meeting Date:** \_\_\_\_\_

**Monies Received for Event: \$** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Money Received by:** \_\_\_\_\_

**Distribution: 1-Requesting Organization/Person**  
**1-IRPC Files (In Club House)**