

## Facility Usage Request

- I. Date Request Submitted: 1/12/22
- II. Overview of Proposed Event: 'THANK YOU' EVENT FOR HEALTH CARE HEROES
- III. Date and Time of Event: 19<sup>th</sup> FEB / MARCH 26<sup>th</sup> 10AM - 12PM (2 HOURS)
- IV. Requestor(s): BHUVI & TEJAS
- V. Community Sponsor(s): NONE
- VI. Solicitation Event (Yes/No) NO
- VII. Objective: THANK HEALTH CARE WORKER  
EDUCATION ABOUT LIFE BEYOND COVID-19  
EDUCATION ABOUT BASIC LIFE SUPPORT
- VIII. Alignment with Our Charter:
- IX. Strategic Value to the Community: INTEGRATE COMMUNITY MEMBERS
- X. References: DR. VINOD PAXVAL, DR. CHANCHAL MALHOTRA, DR. PRAEM  
CARDIOLOGY PATHOLOGY DR. KAPOOR  
DR. MUNIR, DR. SHAUKAT, DR. BEDI
- XI. Financial Impact to CDD Budget:
- a. Staffing Requirements (Hrs./Cost) NONE (ALL VOLUNTEER KIDS)
- b. Materials TABLE
- c. Facility Requirements CLUB HOUSE
- d. Others \_\_\_\_\_
- XII. Risk(s) NONE
- a. Homeowner/Community Safety \_\_\_\_\_
- b. Equipment \_\_\_\_\_

c. Security \_\_\_\_\_

XIII. Insurance Coverage

NOT APPLICABLE

a. CDD \_\_\_\_\_

b. Vendor \_\_\_\_\_

XIV. Risk Control Measures

a. Food and Beverage \_\_\_\_\_ COOKIES, WATER FOR RUNNER/WALKER

b. Traffic \_\_\_\_\_ NONE (WALK IS ON SIDEWALK)

c. Waste Management \_\_\_\_\_ BY VOLUNTEER KIDS

d. Site Safety \_\_\_\_\_ N/A

e. Environmental \_\_\_\_\_ N/A

f. Added Security \_\_\_\_\_ NONE

g. Impact to Homeowner \_\_\_\_\_ NONE