Meeting Room Reservation Form

Date of reservation requested:		Recurring Event? Y_	N	_ Time:
Date taken:	Employee:			
Contact information:				
Name:				
Phone:	E-Mail:			
Type of Activity:				
Business meeting, Independent Co \$25 per hour reservation fee per reservation as a ***Pre-purchased \$25.00 You can use the card to pay for purch	rved date.) Gift card to hold a	nd reserve the date. The c	ard will be	e kept until the event.
Non-Profit Name ***Pre-purchased \$25.00 Gift card to You can use the card to pay for purch			•	
Personal use, birthday, shower, Bible ***Pre-purchased \$25.00 Gift card to You can use the card to pay for purch	hold and reserve th	ne date. The card will be ke	pt until the	e event.
How many persons**	actual c	or estimated (circle one)		
**If less than 6 persons are using the	room, a fee of \$25.	00 in addition to the \$25.00	gift card	is required.
NO OUTSIDE FOOL	OR DRINK ALL	OWED OF ANY KIND		
***Your \$25.00 Gift card will be forfeit	ed for any cancella	ation within 5 days of the e	vent.	
Customer Agrees to our terms by sign circumstances.	າing below. We res	serve the right to make cha	nges due	to unforeseen
Planning to order food for your eve	ent? Yes / No (circ	cle one)		
Special Food Order form completed	d - Yes / No (circle	one)		
Total amount to pay:	Paid (circ	cle one) Yes / No		
Print Name:			 	_
Signaturo		Date:		