

Date: _____

Room Request 2016-2017

Name: _____

Name of Organization: _____

Room Requested: _____ Season: Winter (16'-17') Summer (2016) One Day Event ()

Start Date: _____ End Date: _____ Day(s): M Tu W Th F Sa Su

Phone Number: (Winter) _____ (Summer) _____ Lot#: _____

Email: _____

(Please INCLUDE time for setup prior to the event and clean up after the event)

Set up time: _____ am/pm

Event end by: _____ am/pm

Event Start: _____ am/pm

Clean up by: _____ am/pm

Type of event: _____

Number of Country Roads residents expected to attend : _____

Number of non-residents expected to attend event : _____

Room Rental (if applicable): _____

Do you need Sound/Video (Ballroom): _____

.....
I agree that the room will be left clean and all chairs and tables returned as they were found when entering. I agree to begin and leave as the time(s) and date(s) indicated above. Should additional cleanup be necessary I agree to pay the required cleaning fee as soon as possible.

Signature: _____

Date: _____

COMPLETELY FILL OUT FORMS IN ORDER TO PROPERLY PROCESS YOUR REQUEST.

The Director of Activities must approve ALL requests. Approval will be granted on a priority structure that is in accordance to the rules and regulations approved by the Board of Directors. Please confirm your event(s) at the beginning of the new season. All users must have an email or copy of requested room approval.

Office Use Only

Date Approved: _____

Activity Director: _____

Date Entered into Calendar: _____