

Date Reservation Form

Event Date: _____

Start Time: _____ End Time: _____

Room: _____

I have a key: Y/N

I need someone to help open/close the building: Y/N

Group Sponsoring the meeting/event: _____

Type of meeting/event: _____

Expected number of people in attendance? _____

Contact Person: _____

Phone Number of Contact Person: _____

Special needs for meeting/event (i.e., table and chair set-up, food, etc.)

Signature/Date: _____

For Office Use Only

Date Received: _____ Received By: _____

Put On Calendar: Y/N

Key Out: Y/N Initials: _____ Key In: Y/N Initials: _____