

Date: \_\_\_\_\_

# Room Request

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Room Requested: \_\_\_\_\_ Season: Winter or Summer

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**

Time submitted: \_\_\_\_\_ Receptionist: \_\_\_\_\_

Date Approved: \_\_\_\_\_ Activity Director: \_\_\_\_\_