



PLEASE DRAW ANY DETAILED DIAGRAMS on BACK or ATTACH SEPARATE SHEET.

## ROOM RESERVATION/WORK ORDER

(When reservation is requested, work order details need to be submitted.)

Contact Name and Ministry:

\_\_\_\_\_

Event Name: \_\_\_\_\_

Contact Cell: \_\_\_\_\_

Request Date: \_\_\_\_\_ (provide all dates if recurring event)

Event Date(s): \_\_\_\_\_

Room requested: \_\_\_\_\_ Time set-up needed: \_\_\_\_\_

**Special Requests:** Please specify below: items & quantity needed, and Yes or No for each item

Round Tables \_\_\_\_\_ Rectangular Tables \_\_\_\_\_ Chairs \_\_\_\_\_

Podium \_\_\_\_\_ TV(s)-DVD player \_\_\_\_\_

Microphone \_\_\_\_\_ (check out required w/ facilities director)

Kitchen Needed \_\_\_\_\_ (paper products & plastic ware not supplied by Saint Jude)

Pantry Access Needed \_\_\_\_\_ Coffee Supplies Needed \_\_\_\_\_

(please check out the key from the front office for access to the pantry and/or coffee supplies)

Event starts: \_\_\_\_\_ AM \_\_\_\_\_ PM Event Ends: \_\_\_\_\_ AM \_\_\_\_\_ PM

Include set-up and clean-up time.

**All garbage cans MUST be emptied to dumpster. ONLY painter's tape may be used on walls. I accept responsibility for leaving meeting space as I found it. \_\_\_\_\_ (initial)**

OFFICE USE ONLY	
Set-up by: _____	Check out by: _____
Date: _____	Approved by: _____

