 Facility Request Room Set-up Form

Submitted By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Submitted: \_\_\_\_\_\_\_

Ministry/Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Event: \_\_\_\_\_\_\_\_\_\_

Date of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time of Event: From: \_\_\_\_\_\_\_\_\_\_AM/PM To: \_\_\_\_\_\_\_\_\_\_ AM/PM

Room(s) Needed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Equipment Needed: (Please check off what you need)

**Room Setup Needs:**

5’ Round Tables (Seats 8-9): \_\_\_\_\_\_\_ How Many: \_\_\_\_\_\_\_\_

6’ Rectangular Tables (Seats 8): \_\_\_\_\_\_\_ How Many: \_\_\_\_\_\_\_\_

8’ Rectangular Tables (Seat 10): \_\_\_\_\_\_\_ How Many: \_\_\_\_\_\_\_\_

(Woodruff Only)

Chairs: \_\_\_\_\_\_ How Many: \_\_\_\_\_\_\_\_

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| Diagram of Room Set-Up  (Please draw diagram showing location and number of chairs and tables as you wish to have the room set-up) |
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| For Office Use Only |
| [ ] Approved and Scheduled  [ ] Not Approved  Authorized Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |