

Room Request Form

Group Name: _____

Responsible Party Contact Info:

Name: _____

Phone: _____

Email: _____

Date Requested: _____ Time Requested: _____ to _____

(Include setup time and actual event time)

Number of Attendees: _____ All Participants SB Residents? Yes ___ No ___

Do you charge a fee for attendees? Yes ___ No ___

Set Up requested (select one)	Equipment Requested (selected all needed)
<input type="checkbox"/> Classroom <input type="checkbox"/> Theater <input type="checkbox"/> Conference <input type="checkbox"/> Standard <input type="checkbox"/> U-Shape	<input type="checkbox"/> Projector/Screen \$10 <input type="checkbox"/> TV/DVD/VCR Combo \$10 <input type="checkbox"/> Microphone 1 complimentary Each Additional \$5 <input type="checkbox"/> Podium free <input type="checkbox"/> Tailgater: Small \$10 Large \$50 <input type="checkbox"/> HDMI Cord free <input type="checkbox"/> Apple Adapter free <input type="checkbox"/> Other: Please specify in Notes below

Notes: _____

Submit this request to: Mandi Mendoza, Lifestyle Support, SaddleBrooke TWO Admin in person (520.825.5256) or email to: Recreation@sbhoa2.org

Please note: This form is not a room reservation. This request will need approval and signed contract to become a room reservation.