

FACILITIES FORM

Please Print Neatly

- I will use an Approved Caterer
- Non-catered / Potluck option

FACILITY BRAZILIAN ROOM SHORELINE CENTER
 TEMESCAL BEACH HOUSE FERN COTTAGE

CONTRACT # _____

RESERVATION DATE _____ Today's Date: _____
Day of Week Month Day Year

START TIME: _____ END TIME: _____ NUMBER OF GUESTS: _____ EVENT TYPE: _____

Host's Name: _____ Company Name _____

Address: _____

Telephone () _____
Street City State Zip
 Work () _____ Cell () _____

Email: Name _____ Email address: _____

For Weddings
 Couple's Name: 1st _____ 2nd _____

1st person Home () _____ Work () _____ Cell () _____

2nd person Home () _____ Work () _____ Cell () _____

Emergency Contact Person: _____ Telephone: () _____

How did you hear about our facility? _____

FOR OFFICE USE ONLY

OPTIONAL ITEMS	ORDERED	OPTIONAL ITEMS	RETURNED
Audio Visual System		Piano	
Fireplace		Podium	
Ice		Screen	
		Easel	

CATERING: APPROVED CATERER: _____

Date Received: _____ Arrival Time: Caterer _____ Client _____

NON-CATERED OPTION: Coordinator: _____ Telephone Number: () _____ - _____

Office Orientation : Date: _____ Time: _____ Staff doing meeting _____ Form given: **YES NO**

Physical Orientation: Date: _____ Time: _____ Volunteers needed: _____ Staff doing Orientation _____

FORMS RETURNED: MUSIC & CANDLE FORM Date Received _____ Approved _____

RULES & USE AGREEMENT Date Received _____ **INSURANCE FORMS** Date Received _____

TABLE AND CHAIR NEEDS:

(5' Rounds) _____ (6' Banquets) _____ (Chairs) _____ (3' / 4' Round) _____ (4' Req) _____

NOTES: _____

