

# Neighborhood KidZ Club

## Event Request Form

### CONTACT INFORMATION

Name of organization: \_\_\_\_\_

Contact person: \_\_\_\_\_

Contact's e-mail address: \_\_\_\_\_

Contact's phone number: \_\_\_\_\_

### EVENT INFORMATION

Description of event: \_\_\_\_\_

\_\_\_\_\_

Requested date(s) of event: \_\_\_\_\_

Amount of time needed for event: \_\_\_\_\_ Requested time: \_\_\_\_\_

Number of participants: \_\_\_\_\_

Additional information: \_\_\_\_\_

\_\_\_\_\_

### SET-UP INFORMATION

Sound system      Yes    No

Tables              Yes    No    Quantity: round \_\_\_\_\_ rectangle 6 ft. \_\_\_\_\_ 4 ft. \_\_\_\_\_

Chairs              Yes    No    Quantity \_\_\_\_\_

Dry erase board    Yes    No

Other (Feel free to attach a diagram for set-up) \_\_\_\_\_

\_\_\_\_\_

### OFFICE USE ONLY

Location assigned: \_\_\_\_\_ Garden Villa    \_\_\_\_\_ Western Pines    \_\_\_\_\_ Other \_\_\_\_\_

Date of request \_\_\_\_\_      Date confirmed \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_