

**Request for Athenagoras Room Setup**      Date \_\_\_\_\_

**Return form no less than 14 days prior to event. Complete drawing below: indicate exact location of table and chairs, table type(s) (round or rectangular). Mark chair placement with an "x."**

Date of Event \_\_\_\_\_ Requestor Name \_\_\_\_\_

Event or Group name \_\_\_\_\_

Phone number (h) \_\_\_\_\_ (c) \_\_\_\_\_ Email \_\_\_\_\_

Name of event \_\_\_\_\_ Start time \_\_\_\_\_ End time \_\_\_\_\_

Expected Attendance \_\_\_\_\_ Catering /food: Yes \_\_\_\_\_ No \_\_\_\_\_

Name of Caterer \_\_\_\_\_ Time of caterer arrival \_\_\_\_\_

Kitchen equipment use Yes \_\_\_\_\_ No \_\_\_\_\_ Type if kitchen equipment to be used \_\_\_\_\_

Use refrigerator/cooler Yes \_\_\_\_\_ No \_\_\_\_\_ Amount of space/length of time \_\_\_\_\_

Date room set up needed \_\_\_\_\_ Time room setup needed \_\_\_\_\_ am/pm (circle one)

Audiovisual equipment Yes \_\_\_\_\_ No \_\_\_\_\_ Type \_\_\_\_\_

Complete drawing below: indicate exact location of table and chairs, table type(s) (round or rectangular)

