RESERVOIR COMMUNITY CENTER RESERVATION FORM

Today's Date:	Date of Use:
Estimated Attendance:	
Time of Event: (Allow time for set/up and clean-up w	vithin scheduled time)
Organization:	
Type of Event	
CONTACT INFORMATION and M.	AILING ADDRESS:
Name:	Phone:
Address:	Fax:
City/State/Zip	Email:
conditions set forth in attached "Ren- with and to be legally bound by such	represents that he/she has read and understands all terms and tal Policies and Procedures: Further he/she hereby agrees to comply terms and conditions. Any person, firm or corporation determined presented a materially false rental application may be barred from ities in the future.
Signature of Responsible Party	
OFFICE USE ONLY:	
INSPECTION CERTIFICATE: Date:	Approved/Disapprove deposit return:
Ingmedia Research Configuration	
Deposit received	Rental fee received: