Room Request – Standard Use Application

Today’s Date: ________________________

Organization: ________________________________________________________________

Contact Person: ________________________________________________________________

Address: _______________________________________________________________________

Phone/Cell: ___________________________  E-mail: _________________________________

Event Date(s): __________________________________________________________________

Day of the Week: ________________________  Time - From: ____________________  To: ______________

This Is A (circle one):  One Time Event  Weekly Meeting  Monthly Meeting

Reason For Request: __________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Room Setup Request (please use backside of this sheet for any necessary diagrams): ________________________
________________________________________________________________________________________
________________________________________________________________________________________

# of Expected People: ________________  Room (circle):  3  4  22  Auditorium  Kitchen  30

Name of person responsible for locking the front doors (per rule 13): ______________________

Phone/Cell: __________________________________________  E-mail: _________________________

I have read the Township Building Use Policies, Procedures, Rules & Regulations and agree to them.

Signature: _______________________________________________  Date: ________________________

FOR OFFICE USE ONLY

Standard Use Application Approved By: ______________________________________________

Date: ________________________________