

# Event Request Form

Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Name/Organization: \_\_\_\_\_

Point of Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Are You a Club Member?  No  Yes (Last 4 digits on club card \_\_\_\_\_)

Event Date Requested: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Room Requested: (Check One)  Ballroom  Daedalian Room  OSR  \_\_\_\_\_

Time of Event: \_\_\_\_\_ Estimated Number of Guests: \_\_\_\_\_

Bar Needed:  Yes  No

Type of Event:  Served  Buffet  No Food  Ceremony

Wedding Reception  Birthday  Promotion

Luncheon  Dinner  Retirement  \_\_\_\_\_

Additional Notes:

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FOR OFFICIAL USE ONLY

Event # \_\_\_\_\_

