

**ROADHAVEN RESORT ONE TIME EVENT**  
**ROOM SCHEDULING REQUEST 2022-2023**

Form E-4

**CONTACT INFORMATION**

Name \_\_\_\_\_ Phone: \_\_\_\_\_ Mailbox: \_\_\_\_\_  
Email: \_\_\_\_\_ # of people \_\_\_\_\_ Description of event \_\_\_\_\_

**EVENT INFORMATION**

Event Date: 1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_  
Room Request: 1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_

**\*\*EVENT TIME**

SET UP From: \_\_\_\_\_ AM PM To: \_\_\_\_\_ AM PM

ACTIVITY From: \_\_\_\_\_ AM PM To: \_\_\_\_\_ AM PM

CLEAN UP From: \_\_\_\_\_ AM PM To: \_\_\_\_\_ AM PM

\*\*If you require earlier or later use of room, you must schedule with the activity office for availability. Please respect events prior to or after your event for space and time.

**Private Party Only:** Refundable Clean up Deposit: \$50.00 Due date \_\_\_\_\_ (one month prior to event)

Deposit refunds will be made once the Security Inspection form has been returned and security has indicated there was no damage and the room was left clean and orderly.

**CATERING:** Yes \_\_\_\_\_ No \_\_\_\_\_ Company: \_\_\_\_\_

**ENTERTAINMENT** Yes \_\_\_\_\_ No \_\_\_\_\_ Company: \_\_\_\_\_

**\*\*\*EQUIPMENT NEEDED:** \_\_\_\_\_

\*\*\*If Audio Visual is requested other than a microphone you will need to fill in an AV Form and submit it with this request.

**All Event Requests must meet the following conditions:**

- A room checklist must be filled in and turned in to the activity office the following working day after the event.
- Rooms must be left in the original clean conditions.
- Trash must be collected, removed, and taken to the trash dumpsters.
- Kitchen linen is to be laundered and returned to the room/activity office by 10am the next business day after the event.
- Any damage must be immediately reported to Security and the Activity Director. You are responsible for damaged or missing equipment.
- Failure to meet the above conditions will result in the loss of your security deposit and loss of future room event requests.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

Date and time received by the Activity Office \_\_\_\_\_

Stamp date above

write in time above

Activity Director Initials \_\_\_\_\_ Date approved \_\_\_\_\_

date we put copy of approved room request and room checklist form in Mailbox \_\_\_\_\_