## ROADHAVEN RESORT **MULTIPLE EVENT**ROOM SCHEDULING REQUEST **2023-2024**

(recurring meetings, classes, etc.)

CONTACT INFORMATION		
Name	Phone:	Mailbox:
Event	Email:	
EVENT INFORMATION		
Room Request: 1 <sup>st</sup> Choice	2 <sup>nd</sup> Choice	
# of people Description of	event	
Days of week:	St	tart Date End Date
MON TUE WED **EVENT TIME	THUR FRI SAT SUN	
SET UP From: AM PM	To: AM PM	
ACTIVITY From: AM PM	To: AM PM	
CLEAN UP From: AM PM	To: AM PM	
Any damage must be immediately re	ean conditions.  nd taken to the trash dumpsters.  returned to the room/activity office by  ported to Security and the Activity Dir	
<ul> <li>Failure to meet the above conditions</li> </ul>	may result in the loss of future room	event requests.
Signature	Date	<u> </u>
Date and time received by the Activity Offic		
	Stamp date above	write in time above
Activity Director Initials	Date approved	
date we put copy of approved room reques	t and room checklist form in Mailbox	