

## Carriage Manor Room Request WORKSHEET

Room requests **MUST be made online**. This worksheet walks you through the information you will need to complete the online form. \* Indicates a Required Field. Form Link: <https://www.carriagemanorrv.com/> Room Request Form

### Event Info

Email\* \_\_\_\_\_ Phone #\* \_\_\_\_\_

Coordinator\* \_\_\_\_\_ Club/Group/Other\* \_\_\_\_\_

Event Name\* \_\_\_\_\_  Meeting

Event Discription \_\_\_\_\_

Private Event\*  Yes  No (Private events will not be included on the public CM event calendar)

Requested Room\* \_\_\_\_\_

Second Choice Room \_\_\_\_\_

Event Date\* \_\_\_/\_\_\_/\_\_\_ Event Start Time\* \_\_\_\_\_ AM/PM Event End Time\* \_\_\_\_\_ AM/PM

Is this a repeating event?\*  Yes  No (Selecting No indicates this is a 1 time event)

### Repeating Event Details

What days of the week does this event happen?\*  M  T  W  Th  F  S  S

How often does this repeat\*

Weekly  1st and 3rd Week of the Month  2nd and 4th Week of the Month

Monthly  Other - Specify Dates: \_\_\_\_\_

What is the last date of this event?\* \_\_\_/\_\_\_/\_\_\_ (use 4/30/2023 if event happens all year)

### Event Setup Time/Cleanup Time

Setup Time\*  15 min  30 min  1 hr  2 hrs  Other

If Other: Setup Start Time: \_\_\_\_\_ Setup End Time: \_\_\_\_\_

Cleanup Time\*  15 min  30 min  1 hr  2 hrs

### Resources

Sound  Projector  Other: \_\_\_\_\_

Does your event require use of the kitchen?\*  Yes  No

### Kitchen Usage

Who will be the Safe Serve Representative?\*  Jon Larson  Karen Guzman

Other: \_\_\_\_\_

How will you be using the kitchen?  With the help of the Grub Club  Catered by an outside vendor  Club prepared  Individual use Other: \_\_\_\_\_

Dates & Times the kitchen will be required for food preparation\*:

\_\_\_\_\_