

Organization:		
Contact:*		
*Must attend event	Contact is responsible for the requests below and knowledgeable of procedures.	
Contact Phone:		
Contact Email:		
Date(s) of Event:		
Time of Event:	Beginning:	Ending:
Setup/Cleanup Time:	Setup beginning:	Cleanup ending:
Key pickup:	Date:	Time: Keys are obtained from lockbox. Check to request code: <input type="checkbox"/>
Number of Attendees:	Refer to the number of chairs per room to determine if more than one room is needed.	
ROOM(S) REQUESTED:	SINGLE ROOM(S) [Partition closed]	COMBINED ROOM(S) [Partition open]
Address for meeting invitations: 2423 Williams Dr. Suite 101	When requesting more than one room to be used <i>separately</i> , check boxes below.	Select rooms below if partition(s) should be open/rooms combined.
	A (U shape-30 chairs) <input type="checkbox"/>	A & B Combined <input type="checkbox"/>
	B (square-30 chairs) <input type="checkbox"/>	B & C Combined <input type="checkbox"/>
	C (5-8 round tables-35 chairs) <input type="checkbox"/>	A, B & C Combined <input type="checkbox"/>
Will food be served?	Y <input type="checkbox"/> IF YES, VACUUMING IS REQUIRED. N <input type="checkbox"/>	
Trash reminder:	Trash should be removed from the trash can and placed in the white bin across from the Ladies Restroom. A clean liner should be replaced in the trash can. Extra liners are on top of the equipment cabinet. Please check box to acknowledge your understanding: <input type="checkbox"/>	
EQUIPMENT NEEDS:	***ONLY 2 MICROPHONES MAY BE USED SIMULTANEOUSLY*** (Select up to 2)	
Microphone(s): Y <input type="checkbox"/> N <input type="checkbox"/>	Wireless Lavalier/Mic <input type="checkbox"/> Podium & Mic <input type="checkbox"/> Wireless Handheld Mic <input type="checkbox"/> Corded Handheld w/Stand <input type="checkbox"/> Will Sound be needed in multiple rooms? Y <input type="checkbox"/> N <input type="checkbox"/> If yes, complete BELOW. ^A	
Projector: NOTE: *Uses 15 pixel connector *Converter needed for Apple/Mac laptops (not provided) *HDMI cable for use in single room only-cannot be linked to 2 or 3 rooms.	Will Projector be used? Y <input type="checkbox"/> N <input type="checkbox"/> Will Projector be used in multiple rooms? Y <input type="checkbox"/> N <input type="checkbox"/> If yes, complete BELOW. ^A	
	IF USING MULTIPLE ROOMS, PLEASE COMPLETE: ^A In which room will the computer/laptop &/or microphone be connected? Make ONE selection only: Room A <input type="checkbox"/> OR Room B <input type="checkbox"/> OR Room C <input type="checkbox"/>	
Easels:	Y <input type="checkbox"/> N <input type="checkbox"/> Number: _____	
Other (please provide any additional detail):		

IMPORTANT REMINDERS: GHF does not have janitorial staff; room set-up, clean-up, and equipment set-up and/or connections are your responsibility. Instructions for connecting microphones and projectors are in the equipment cabinet baskets.