VERNON COLLEGE FACILITY RESERVATION FORM

Complete form and email to roomrequest@vernoncollege.edu

VC Employee Request:		Cor	Community Request:	
Person or Organization R	equesting:			
Event/Activity:				
Contact information:				
Email:			Phone:	
Specify Facility/Room:				
Date:	Day:			
For multiple dates, please	e list in Addi	tional Notes below.		
Time: .m	n until	.m		
Estimated number in atte	endance:			
Every classroom has proj	ector/screen	/computer		
For all other rooms, pleas	se check all t	hat apply/being requested	d below:	
Podium		Jumbo screen (V	ernon only)	Laptop
Microphone		Outdoor speaker	r	
Lapel mic		Portable screen		
Will VC maintenance assistance be required for setup, cleanup, etc? Yes No				No
Additional Notes:				
*******	******	********OFFICE USE ON	NLY************	******
Service Fee? Yes	No	Amount: \$	Rec'd date:	

Vernon College assumes no liability for any accidents that occur by participants, or schedulers of any activities scheduled in Vernon College facilities.