

For office use only:  Approved  Denied  Group Notified Date notified: \_\_\_\_\_

Clark County Cooperative Extension Education Center

## MEETING ROOM RESERVATION FORM

**Return completed form to:** Clark County Extension Service • 1400 Fortune Drive • Winchester, KY 40391-8292  
859-744-4682 (office) — 859-744-4698 (fax)

*(Complete entire form)*

**\*\*\* ALL REQUESTS WILL BE REVIEWED BEFORE APPROVAL \*\*\***

Date of meeting: \_\_\_\_\_ Name of organization/group: \_\_\_\_\_

Title of meeting: \_\_\_\_\_ Estimated attendance: \_\_\_\_\_

Time room(s) are needed: \_\_\_\_\_ until \_\_\_\_\_ Time meeting begins \_\_\_\_\_ and ends \_\_\_\_\_

Contact person: \_\_\_\_\_ Contact person phone number: \_\_\_\_\_

Contact person email: \_\_\_\_\_

Description of meeting:

### **Room(s) Requested:**

Check	NAME OF ROOM	Seating Capacity
<input type="checkbox"/>	Meeting Room A	66
<input type="checkbox"/>	Meeting Room B	58
<input type="checkbox"/>	Classroom	24
<input type="checkbox"/>	Project Room	28
<input type="checkbox"/>	Multi-Purpose Room	35
<input type="checkbox"/>	Conference Room (NO food or drink allowed in this room)	

### **Room(s) Set-up:**

*Afternoon, evening, and weekend groups may have to set-up their room(s).*

**Classroom Style:** (tables are parallel to front wall)

3 chairs per table on one side

2 chairs per table on one side

**Theater Style:** (ALL chairs — NO tables)

**Banquet Style:** (tables are perpendicular to front wall)

3 chairs per table on both sides

2 chairs per table on both sides

**Square Style:** (Chairs will be on outer side of table)

**U Shape Style:** (Chairs will be on outer side of table)

Side Table:

Registration Table:

### **Use of Audio Visual:**

Projector

Computer

Microphones

### **Additional Comments:**

I have read the policy regarding use of the Extension facilities and equipment and agree to adhere to the policy statement. In addition, I understand the Clark County Extension Council/District Board is not responsible for accidents, injury, illness, or loss of group or individual property. I also understand that the Clark County Cooperative Extension Service System is organized to provide all members of the county the opportunity to participate in educational programs enabling them to more effectively contribute to the wellbeing of their families and community. Educational programs of Kentucky Cooperative Extension serve all people regardless of economic or social status and will not discriminate on the basis of race, color, ethnic origin, national origin, creed, religion, political belief, sex, sexual orientation, gender identity, gender expression, pregnancy, marital status, genetic information, age, veteran status, or physical or mental disability.

Contact Person's Signature: \_\_\_\_\_ Date: \_\_\_\_\_