



**Booking Request Form**

Please complete the following information. All information provided will be kept on file for our records and used for event purposes.

**General Information:**

Organization Name \_\_\_\_\_ Contact #: ( ) \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Fax Number: ( ) \_\_\_\_\_ Cell Phone :( ) \_\_\_\_\_ Email: \_\_\_\_\_

**Physical Address:**

\_\_\_\_\_  
Street Address                      City                      State                      Zip Code

**Mailing Address:**

\_\_\_\_\_  
Street Address                      City                      State                      Zip Code

**Event Information:**

Name of Event: \_\_\_\_\_ Location of Event: \_\_\_\_\_

Briefly describe the event(s):

(Conference, Training, Seminar, Night of Worship, expected guest speakers and ministers, etc. Please note if the event will take place in multiple venues.): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please enter the following information for each event:

1. Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ Meeting Length: \_\_\_\_\_ Est. Attendance: \_\_\_\_\_

2. Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ Meeting Length: \_\_\_\_\_ Est. Attendance: \_\_\_\_\_

3. Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ Meeting Length: \_\_\_\_\_ Est. Attendance: \_\_\_\_\_

4. Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ Meeting Length: \_\_\_\_\_ Est. Attendance: \_\_\_\_\_

5. Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ Meeting Length: \_\_\_\_\_ Est. Attendance: \_\_\_\_\_