



Accomodations Form

Name of Event: _____

Contact Person: _____

Address: _____

Phone #1: _____ Phone #2: _____

Fax: _____ Email: _____

Event Details

Event Date: _____ Official Starting Time: _____

Time in: _____ Time out: _____ Security Arrival: _____ Departure: _____

Kichen Use: _____ Dinner Service Use: _____

Music _____ Caterer: _____ Rentals _____

A/V Requests

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |

Event Expenses

Facility: \$ _____ Kitchen: \$ _____ Dinner Service: \$ _____

Security: _____ (X) _____ (X) _____ = _____

# of officers	hourly rate	# of hours	Total
---------------	-------------	------------	-------

Extra Time: 1. \$ _____, 2. \$ _____, 3. \$ _____

Extra Items: 1. \$ _____, 2. \$ _____, 3. \$ _____

Total cost of event: \$ _____