

**ROOM REQUEST FORM**  
For  
**CLIFTON HEIGHTS PRESBYTERIAN CHURCH OF EASTER LAKE**

Name of Group: \_\_\_\_\_

Purpose of Meeting: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Number of People \_\_\_\_\_

Are you a  Profit  Non-Profit?

Date Room Needed: \_\_\_\_\_ Time Room Needed From: \_\_\_\_\_ To: \_\_\_\_\_

**Contact Person**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How Does the Room Need to be Set Up?  Classroom  Banquet  Meeting

Any other questions or requests? \_\_\_\_\_  
 \_\_\_\_\_

**FEES**

	<b>1-4 hours</b>	<b>4-8 hours</b>
Non-Members of Clifton Heights & For Profit Organization	\$25	\$50
Members of Clifton Heights and Non-Profit Organization	No Charge	No Charge
Use of Audio Visual Equipment	\$25 set up fee plus \$10 hour for a/v assistant (Not to exceed \$55)	
Please make checks payable to "Clifton Heights Presbyterian Church"		