

# Event Set-up

Please complete this form for group meetings / dinners / events / etc. Place the form in the plastic wall tray outside the office door, at least a week prior to the event to allow time to set up the tables

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

Contact Person \_\_\_\_\_

Date & Time \_\_\_\_\_

Phone Number \_\_\_\_\_

Approx. # of People \_\_\_\_\_

No. of tables needed \_\_\_\_\_

Please Check One:

One-time event     Monthly set-up     Other \_\_\_\_\_

Please indicate on the diagram, how you want the tables and/or chairs placed in the Fellowship Hall. Provide additional information about equipment needed or special instructions:

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