**PERSONAL INFORMATION**

Requestor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Request: Click or tap to enter a date.

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

Requestor Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Requestor Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of the Event Click or tap to enter a date. Expected number of Guests \_\_\_\_\_\_\_\_\_\_\_

Start Time of Event \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ End Time of Event \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Room Requested:  Family Dining Room ( 8 persons) $10

Pub (20 person $30)

Fee For Space  Charge to Resident Account  Pay to Accounting

Additional Requests :  Chairs \_\_\_\_\_  Tables \_\_\_\_\_\_\_  Other \_\_\_\_\_\_\_\_\_\_\_\_\_

* *Please note that it is your responsibility to set up the room in the way you would like. Enough tables and chairs will be available in the room you have requested prior to your event start time.*

*Please forward completed request to* [*reception@samaritanplace.ca*](mailto:reception@samaritanplace.ca)

*A confirmation of booking will be sent out.*

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

For Office Use

Approval Click or tap to enter a date.  Requestor Notified Click or tap to enter a date.

Entered into Booking Calendar

Accounting Notified

Housekeeping Notified