

CALENDAR RESERVATION REQUEST FORM – Clyde Hill Campus

Important things to remember:

Date Submitted: _____

1. Check the Tandem calendar for room/time/date conflicts.
2. Have your Principal sign the form.
3. This form requires three (3) weeks' notice from the time of approval before the event.

Exceptions may cause your event to be cancelled or postponed.

(NOTE: If you are unsure of your needs, *circle yes* and that department will check-in with you.)

EVENT DETAILS

Date: _____ Start Time: _____ End Time: _____ Budget Code: _____

Campus/Location: _____ Attendees Expected: _____

Organizer's Name : _____

Organizer's email: _____ Phone: _____

Principal's Signature for Approval: _____ **Date:** _____

FACILITIES

Room Setup Needed: **NO** **YES** (*Facilities will contact you*)

of rectangular Tables: ___6' ___8' ___6' Round | # of Food Tables: ___6' ___8'
Chairs per table: _____ Podium - Yes No

Describe Preferred Room Configuration and/or provide separate drawing:

TECH

Do you need tech assistance? **NO** **YES** (*Tech will contact you*)

Tech will train **the Organizer** to use basic Sound/Projector/Promethean during school hours for their event. Tech requirements outside that and theatrical lighting will require hiring an outside tech operator.

TRANSPORTATION

Do you need transportation/parking assistance? **NO** **YES** (*Transportation will contact you*)

Off campus field trips and retreats will require a separate transportation form.

Décor/ Catering

Circle your requirements: **NONE** **DECOR** **CATERING** **LINENS**
(*Events will contact you*)

When you are done, please scan this form and send to Christine.Satterlee@bellevuechristian.org. A confirmation email will be sent once it has been added to the calendar.

Please note, the subject of the email will coincide with calendar event title and the event date.

(i.e.. **Building Bridges Dinner 10-24-19**)

Thank you! Please email Christine or facilities@bellevuechristian.org with any additional questions.