

**HARRISON COUNTY RECREATION COMPLEX
SCHOOL RESERVATION FORM**

DAY _____ DATE _____ PO # _____

SCHOOL _____ GRADE(s) _____

ACTIVITY _____
IS HCPR PARTNERSHIP NEEDED? HAVE ARRANGEMENTS BEEN MADE WITH THE DIRECTOR? _____

NUMBER OF PEOPLE EXPECTED TO ATTEND: _____

ROOM NUMBER: TO BE DETERMINED BY SIZE OF EVENT A _____ B _____ C _____

KITCHEN: YES: _____ NO: _____ COOKING: _____

NUMBER OF TABLES: _____ NUMBER OF CHAIRS: _____

SET-UP TIME: _____

EVENT TIME: _____ TAKE DOWN TIME: _____

PERSON RESPONSIBLE: _____

SCHOOL TELEPHONE # _____

RESPONSIBLE PERSON'S HOME/CELL TELEPHONE # _____

Signature of Responsible Person/Title

SPECIAL INSTRUCTIONS: _____

IF REQUIRED FOR YOUR MEETING, INCLUDE PODIUM, MIC, FLAG, ETC IN LAYOUT

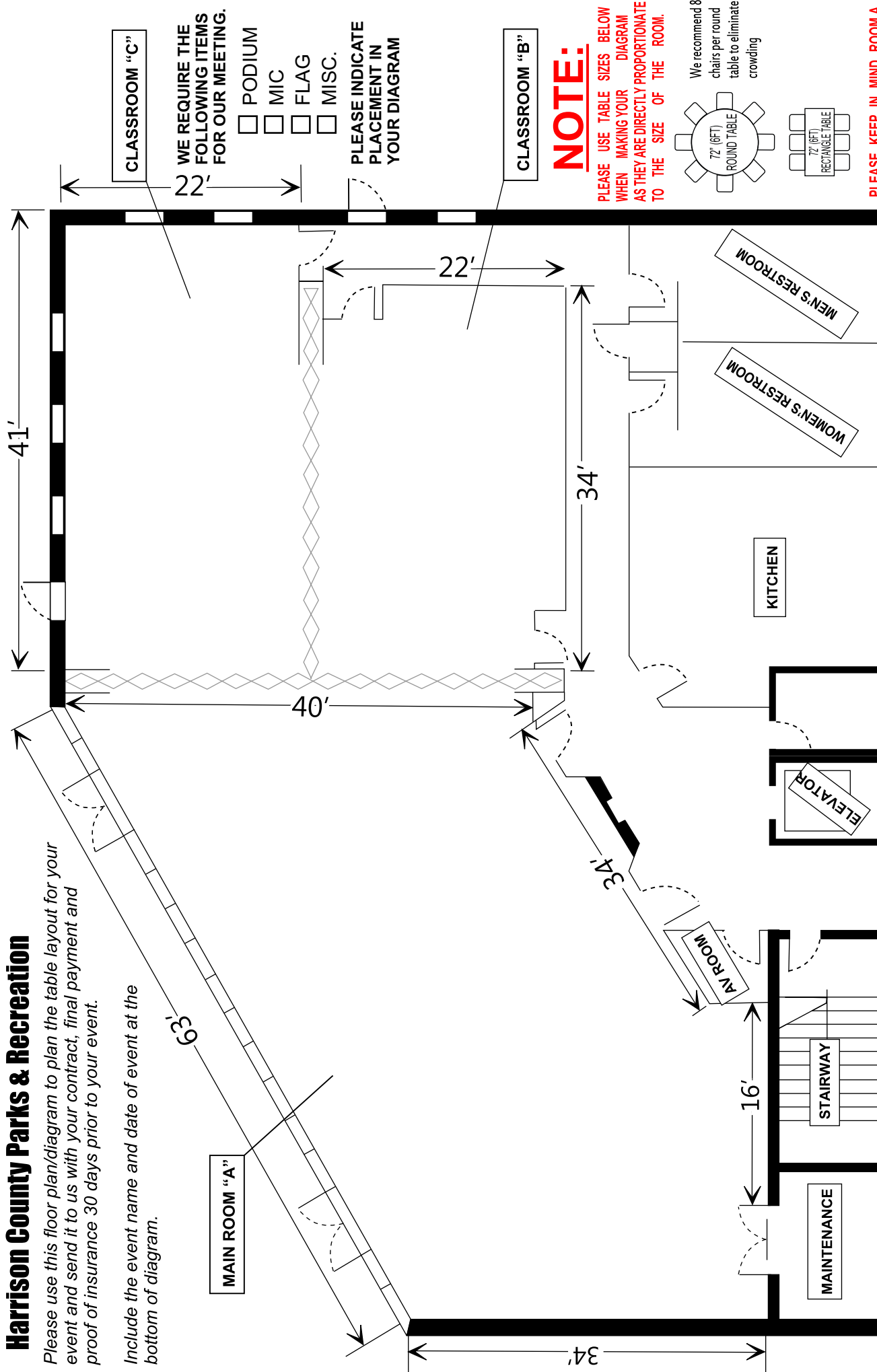
**ARE YOU EATING LUNCH AT COMPLEX - NEEDED ARRANGEMENT (special instructions above)
HOW MANY BUSES _____**

Reservations will be listed on the Harrison County Recreation Complex Schedule book when the above information is completed and form turned in at the Parks & Recreation Office. Caretaker will be here 1/2 hour prior to your event. Please be as precise as possible on event times to be fair to the caretaker's schedule. If user is detained, contact caretaker within (1) hour to insure entry. Please notify HCPR office of a cancellation (304-423-7800)

Harrison County Parks & Recreation

Please use this floor plan/diagram to plan the table layout for your event and send it to us with your contract, final payment and proof of insurance 30 days prior to your event.

Include the event name and date of event at the bottom of diagram.



FLOOR PLAN / DIAGRAM

NAME/EVENT: _____

DATE: _____