## **RESERVATION FORM**

		Date:
Event Date(s):	Type/Name of Event:	
Event Time(s) <u>in/out</u> :	Set Up (if needed) Time in/	out & Date:
Organization/Group/ Company Nam	ne:	
Contact Person(s):		
Address:		
City:		
Phone Number:	2 <sup>nd</sup> Number:	
Email:	Estimate	ed Attendance: Alcohol Y / I
		Security Reminder_
Facility Reserved:		
Arena	Exhibition Building	Poudre River Pavilion
Arena Parking Lot	Exhibition Kitchen	Platte River Pavilion
JBS Stage	4-H Building	Big Thompson Pavilion
Bunkhouse	4-H Kitchen	Mt. Elbert Pavilion
Buckle Club	Saddle Club	Grass Oval(s):
Event Center	Livestock Barn	
EC Conference Rm. A / B / C	Other:	
Set-Up Style:		
Banquet Hallow Squ	areU- ShapeHorseshoe _	CircleCocktail
Theater Classroom	Boardroom Cabaret (	Concert Octagon
Herringbone See Dia	gram/Notes Other	
Equipment Request:		
		Reservation #
		Receipt #