Fax form to: 972-661-2636



## **ROOM RESERVATION & FACILITIES SET-UP**

EXTENTE NAME.			DATE	
EVENT NAME:			DATE:	
ROOM REQUESTED:			TIME:	
CONTACT NAME:			PHONE:	
	MEETING / AUDIO VISU	JAL EQUIPM	ENT REQUESTE	CD .
# Guests	Lectern		DVD	Mic
# Chairs	Registration Table		VCR	Mic Stand
# Round Tables	Whiteboard / Markers / Eraser		TV	Projector
# 8' Tables		I	Laptop	Screen
L			LCD Remote	Extension Cord
			Adapter	'
	KITCHEN SUPPLIES RE	QUESTED	1	BEVERAGE
D'11. Di.(			1.4. 01.4	REQUESTE
Disposable Plates	Temple Dishes		loths - Cloth	Water
Disposable Cups	Coffee Cups / Saucers	Cloth N		Coffee
Plastic Knives Plastic Forks	Water Glasses Wine Glasses	Skirting Table C	loths - Plastic	Hot Tea
Plastic Spoons	Silverware	High Ch		Iced Tea Lemonade
Paper Napkins	Chaffing Dishes	High Ci	ians	Grape Juice
	PLEASE DIAGRAM YO			

Submitted: