PRELIMINARY BOOKING FORM

DATE: ***TIME:*** ***TAKEN BY:***

Above portion to be filled out by staff

NAME:

ADDRESS:

CITY, STATE, ZIP:

PHONE (DAY): ***PHONE (EVENING):***

E-MAIL ADDRESS:

CLUB/ORGANIZATION:

POSITION HELD:

TYPE OF EVENT:

DAY & DATE OF EVENT:

TIME OF EVENT:

NUMBER OF PARTICIPANTS:

WILL REFRESHMENTS BE SERVED? ***ALCOHOL?***

SPECIAL NOTES: