

**PARKWAY NORTH CENTER
CONFERENCE CENTER USE DETAIL**

Tenant: _____

Address: _____

Phone Number: _____ Event Contact: _____

Date of Event: _____ Number of People Attending: _____

- Rooms Available:
- Autumn Room
 - 32 Maximum (Classroom Style)
 - 66 Maximum (Chairs Only)
 - (Based on attendance) Summer Room
 - 72 Maximum (Classroom Style)
 - 144 Maximum (Chairs Only)
 - Conference Room
 - 100 Maximum (Classroom Style)
 - 200 Maximum (Chairs Only)

- We would like to book for:
- Half Day (8:00AM – 12:00PM)
 - Half Day (1:00PM – 5:00PM)
 - Full Day (8:00AM – 5:00PM)
 - Other* (Specify below)
(*Rates based on time slots.)

Event Will Begin At: _____ AM / PM, and Will End At: _____ AM / PM

Type of Event: _____

Will this event be catered? YES NO Vendor: _____

Will alcohol be served? YES NO Vendor: _____
**Events where alcohol is served are subject to additional COI requirements per your lease*

Please indicate furniture set up: _____

Please indicate number of additional chairs or tables, if needed: _____

Please indicate microphone(s) if needed:

- Handheld Lapel
- Gooseneck Table Top

** Additional fee for set up and clean up fee. See rate sheet.

Please contact your facilities manager to enter a 360Facility request for billing purposes.(Include the 6 digit work order # below):

Work Order # _____