



College Hill Presbyterian Church
CONNECTING • SERVING • CELEBRATING

5742 Hamilton Ave. ~ Cincinnati, OH 45224-2999
513.541.5676 ~ www.chpc.org ~ fax.

DATE SUBMITTED: August 3, 2006

ROOM RESERVATION & SET-UP REQUEST

Our desire is to be of service to you. Please complete this form in order that we may better meet your needs. Contact the specific Ministry area representative if there are additions or changes to information.

Event Name: _____

List of all dates of the Event: _____

Room(s) Requested: _____

Starting Time: _____ Ending Time: _____

Time 1st person arrives: _____ No. Expected: _____

Contact Person from your group: _____

Phone: (H) _____ Phone: (W) _____

Phone: (C) _____ Phone: (C) _____

Email: _____ Email: _____

Ministry Area Responsible: _____

SUPPLIES/SERVICES for which there is a fee charged:

PAPER DINNERWARE

_____ 9-1/4" round, divided
_____ 6" dessert
_____ 6" soup/salad bowl

COFFEE

FULL batch _____ Reg _____ Decaf _____
HALF batch _____ Reg _____ Decaf _____
Indiv sugar & creamer? _____

PLASTIC UTENSILS

_____ Knives _____ Spoons _____ Yes _____ No

_____ Forks

PAPER GOODS

_____ Napkins, luncheon size
_____ Placemats
_____ Tablecloths, round tables
_____ Tablecloths, 6 ft. tables
_____ Tablecloths, 8 ft. tables

CUPS

_____ 8 oz. Styrofoam (hot/cold)
_____ 9 oz. Plastic (cold)

PAYMENT INFORMATION

Charges for supplies/services billed to:

_____ CHPC Ministry

Account No: _____

Name: _____

Address: _____

Email: _____

NOTE:

(Coffee is made in the FH kitchen. You must transport to serving area.)

DISHWASHING (2 weeks adv. Notice) You are responsible for kitchen cleanup unless dishwashing service is requested.

SPECIAL INSTRUCTIONS (draw or describe special setup requirements): _____

YOUR EQUIPMENT NEEDS

Check all items needed and list the number of each type needed.

_____ **TABLES** (subject to availability)
_____ 4 foot (GREAT Hall)
_____ 6 foot (Barnabas 2nd FL, MC lower)
_____ 8 foot (Fellowship & GREAT Hall)
_____ 60 inch round (Fellowship & GREAT Hall)

_____ **CHAIRS** _____ No. Needed

_____ **TV & VIDEOTAPE (VHS) PLAYER**

_____ **MICROPHONE** (1 Standard Mike)

_____ **AUDIO SETUP / VIDEO PROJECTION**

14 days advance notice required. Confirmation will be made in 3 days based on the availability of qualified technicians. If help is not available, request cannot be granted.

_____ **Stand(s) / handheld microphone(s)**

_____ **Liveliestyle, clip-on mikes**

_____ **Boom stand & mike for piano**

_____ **Guitar mike** _____ **Video Projector**

_____ **Cassette Player** _____ **CD Player**

_____ **PROJECTOR**

_____ Slide (Carousel) _____ Overhead transparency

_____ **PROJECTION SCREEN**

_____ **PODIUM / LECTURN**

_____ Floor Model _____ Table Model

_____ **MISCELLANEOUS**

ARE YOU PLANNING TO HAVE ..

Child Care? Contact Child Care Coordinator.

The Deacons Usher? Contact Deacons

An Offering Taken? Contact Trustees

Need Dish and Pan Washing? Notify Event Scheduler in the Main Office

Sound or Video Needs? Please let the Event Scheduler know.

AT LEAST 14 DAYS ADVANCE NOTICE IS REQUIRED FOR THESE SERVICES.

Call the Main Office, **513.541-5676**, 9AM-5PM, Mon-Fri, for the current person to contact for assistance.

FACILITIES RENTAL FEE: \$ _____ Facilities Management Office Approval: _____ Date Approved: _____