

# Wallingford COMMUNITY Senior Center

## Rental or Use of Space Request Form



### Contact Information

First & Last Name:			
Phone #1:	Cell	Work	Home
Phone #2:	Cell	Work	Home
Email:			
Preferred form of communication:	Email	Phone	

### General Information:

Name of Organization or Group?			
Nonprofit	Community Group	Business	Personal
Other, explain:			
Organization Website:			

### Event Description:

What is the nature of your event? (Check all that apply)		
Meeting	Fundraising Event	Class /Workshop
Reception/Social Event	Cooking/ Meal Service	
Other, brief description:		
Briefly list desired space and other requirements:		
Is this event advertised & open to the public?		
Yes		No
Event Recurrence:		
One Time Use	Recurring Use, describe frequency:	Multiple Dates/Sessions, how many?
How Many Attendees?		

### Event Date & Time:

How long is your Event? (include set up & clean up) :				hours	minutes
Preference #1	Date	/	/	Time	: am pm
Preference #2	Date	/	/	Time	: am pm
Preference #3	Date	/	/	Time	: am pm

### Please Read:

This form is not a reservation or a confirmation of room rental, only an inquiry. Once a Rental or Community Use of Space Form has been submitted, it will be reviewed by WCSC staff. Please give staff 3 business days to contact you regarding your Form.