

Reservation Form

Date: _____

Date of Event: _____

Time of Event: _____

(Estimate) Ending Time: _____

Rooms Needed (circle one or both – please note: backroom is non-smoking)

Social Room

Back Room

Type of Event: _____

Expected Number of People: _____

Contact Name: _____

Contact Phone Number: _____

Rental Room for Members \$75

Cleaning Deposit for Members \$50

Rental Room for Non-Members \$100

Cleaning Deposit for Non-Members \$75

Contact Signature: _____

Please leave the form with the bartender, you will be contacted for approval as soon as possible.

Board of Trustees

(for Management Only)

Approved by: _____

Date: _____

Rental: _____ Deposit: _____ Deposit Returned: _____