

## ICEC Event Reservation Form

Please provide the following information as accurately as possible. Upon its review, you will receive a confirmation. The reservation will be complete only after a contact person has been assigned.

**Please print or write in UPPER case letters.**

Event Name \_\_\_\_\_

Date of Request \_\_\_\_/\_\_\_\_/\_\_\_\_

Event Date-Time From: \_\_\_\_/\_\_\_\_/\_\_\_\_ \_\_\_\_:\_\_\_\_ AM/PM

To: \_\_\_\_/\_\_\_\_/\_\_\_\_ \_\_\_\_:\_\_\_\_ AM/PM

Decoration / Setup \_\_\_\_/\_\_\_\_/\_\_\_\_ From: \_\_\_\_:\_\_\_\_ AM/PM To: \_\_\_\_:\_\_\_\_ AM/PM

Number of Attendees (expected) \_\_\_\_\_

Room(s) (Please check) ☐ Main Hall ☐ Upstairs Room(s) ☐ Food-warming Area

Other Amenities (Please check) ☐ Stage Lights ☐ Projection Screen

### Contact Person (In-charge for the Event)

Name \_\_\_\_\_

Address  
(No PO Box) \_\_\_\_\_

Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_ E-mail: \_\_\_\_\_

### Additional Equipment (e.g. Halogen Lights, Sound System, Mics (Nos.), Projector Screen)

Provided by ICEC: \_\_\_\_\_

External / Personal: \_\_\_\_\_

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### For Official ICEC Use Only

Have the check-out rules been handed over and explained in advance? ☐ Yes ☐ No

Names of Parking Attendants \_\_\_\_\_

Custodian Name: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_

Technician Name: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_

Additional Information (if any): \_\_\_\_\_

Check-out Time \_\_\_\_/\_\_\_\_/\_\_\_\_ \_\_\_\_:\_\_\_\_ AM/PM

Custodian's Observations: \_\_\_\_\_

\_\_\_\_\_