

POWELL BUTTE COMMUNITY CENTER

P. O. Box 87

8404 SW Reif Rd.

Powell Butte, OR 97753

www.pb-center.com

BOOKING REQUEST – REPEAT RENTER FACILITY USE DETAILS

Name of Organization _____

Responsible Party _____ Phone _____

Address _____

City/ State/ Zip _____

Contact email (*required*) _____

Alternate Responsible Party _____

Email _____ Phone _____

Frequency of rental: Weekly Monthly Other _____

Days/Dates/Times requested: _____

Facility requested: (maximum occupancy in brackets)

Conf Rm #1 (15 ppl) Conf Rm #2 (25 ppl) Kitchen/Alcove (30 ppl) Hall (300 ppl)

Type of Event: _____ Anticipated # attendees _____

Non-profit/Benevolent Society

Please provide intended use of the facility and a description of activities connected to the event:

For a rental quote and/or a booking request:

1. Email this form to events@pb-center.com or mail it to the P. O. Box above. The Board will determine eligibility and Center availability for your request and notify you. If your request is approved, a rental quote will be emailed to you based on the information provided on this form.
2. Your acceptance of the quote will generate a Rental Contract. The facilities deposit check and signed contract must be received back within 10 days of contract issue date to secure the date and facility. **If the first event is in less than 30 days, contact events@pb-center.com immediately.**

Signature verifies accuracy of information and agreement with the terms herein. This form will become part of the Rental Contract.

Signature: _____ Date: _____