NON-PROFIT EVENT REQUEST FORM

Liz Bowman:

Shelly Emans

740-815-2783

740-975-4402

Thank you for your interest in Andrews House, a 501c3 non-profit help-giving community center. To guarantee your reservation, please fill out the information below and return this form, along with a \$20 non-refundable deposit. An invoice will be mailed prior to your event

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			ANDREWS HOUSE
Date(s) requesting:			PEOPLE STRENGTHENING PEOPLE
Name:			39 West Winter Street Delaware, OH 43015
Organization:			740.369.4520
			www.andrewshouse.org
Address:			info@andrewhouse.org
Phone: Email:			
Purpose:			
Anticipated number attending: Adults:			
Time of Event: (Billing time will include the total amou	_		able to other parties)
		:	
Beginning time: Ending time:			
Room(s) requested:			
Great Room (\$17.75/hour) Kitche	en (\$14.50 hour) Kit	chen only(\$15 flat fee wher	n renting other rooms)
Dining Room (\$17.75/hour) Nicely	/ Room (\$12.50/hou	ır)	
Additional items available for use at no charge:			
Chairs: 83 available 5 tables: rectangular, 4' x 2	: 83 available 5 tables: rectangular, 4' x 2' 10 tables: rectangular, 6' x 2.5" (s		seat 8)
6 tables: round, 48" (seat 6) 2 tables: round, 54" (seat 8	Coffee service (12-cup coffee maker and push-pots available—please provide your own supplies)		
Items available for an additional charge:			,
Projector/Screen (\$5.00/hr -max. \$25.00/day)			
Please let us know if you need the projector and screen. It is proper cords, etc. for use with our machine.	s also recommende	d that you stop in to ensure	that you have the
Liability Insurance Policy & Holder Number			
Some events may require a liability certificate naming Andre	ews House as an "a	dditional insured."	
I understand that I am responsible for set-up, clean-up, and grounds, and that I will be assessed an additional fee for no		or my group cause in the b	uilding or on the
Signed		Date	
	. Would you like t	to receive our newsletter?	Yes No
EMERGENCY PHONE NUMBERS:	Trouta you like		33 .40
If your event is held during non-business hours and there is an Emergency situation, please call one of the following:		For Office Use:	
Alison Humphreys 740-803-2968 Mel Corroto: 740-971-3489		Deposit Amount: Date Received:	