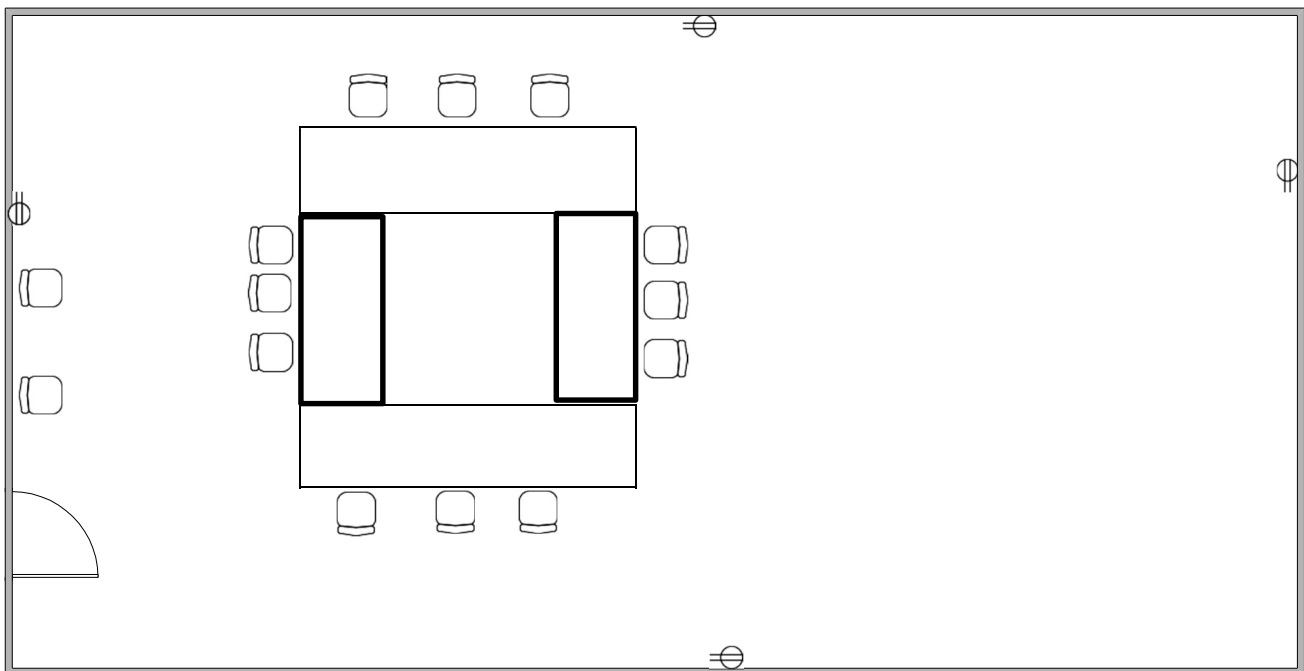


FAIRWAY RECREATION CENTER MEETING ROOMS (2nd FLOOR)
12 PERSON CAPACITY

Club/Event _____

Contact Name _____ Phone # _____

Event Date _____ Event Hours ____ to ____ Audio/Visual Tech Y ___ N ___ \$30 per hour



⊖ = ELECTRICAL
OUTLET

Podium/Mic _____ Wireless Mic _____ Projector _____ Computer Connection Type _____

(RCSC Custodial Crew, please tape all cords down and cover with floor mats/rugs if required)

Notified: Custodial Staff _____ A/V Technician _____

SET-UP SHEETS REQUIRED 4 WEEKS PRIOR TO YOUR SCHEDULED EVENT!

Contact Person Signature _____ Phone _____