

Bellmawr Public Schools

Event Preparation/Set-up Request

For office use only Custodians Name _____ _____ _____ _____ _____

Date of Event _____ Start Time: _____ End Time _____

Contact Person _____ Phone Number or Ext. _____

Place/room event is to be held _____

Equipment/ Supplies needed: (example: tables, chairs, sound equip., extension cords, screens, etc.)

Description _____ Quantity _____

Description _____ Quantity _____

Description _____ Quantity _____

Description _____ Quantity _____

Description _____ Quantity _____

Description _____ Quantity _____

Description _____ Quantity _____

Other _____

On the reverse side is a diagram of the All Purpose Room. If you are requesting to use this room, please do a rough design on how you would like things set-up.