



## IBC Bank Plaza Community Suite

### Meeting Room Request Form

Today's Date: \_\_\_\_\_

Check one:    New Request \_\_\_\_\_    Change Request \_\_\_\_\_    Cancel Request \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Phone Number: \_\_\_\_\_    Email Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_    Non-Profit? ( YES / NO )

Event Description: \_\_\_\_\_

Date(s): \_\_\_\_\_    Start Time am/pm: \_\_\_\_\_    End Time am/pm: \_\_\_\_\_

# of People Attending : \_\_\_\_\_

Will you be serving food: \_\_\_\_\_

Will you be serving alcohol: \_\_\_\_\_

Room Requirement(s): (*\*list any media needed, setup request for tables and chairs*)

\_\_\_\_\_

#### *Times of Use*

Monday - Friday:

9:00 AM - 5:00 PM

*\*Requests are on a first come first serve basis.*

*\*\*Time extensions must be approved and are not guaranteed.*

*\*\*\*Any large deliveries including catering, table rentals, etc. require vendor certificate of insurance*

**\*Please email your request form to Erin Welch: [ErinWelch@ibc.com](mailto:ErinWelch@ibc.com) and also cc:  
Jamie Burkett: [JamieBurkett@ibc.com](mailto:JamieBurkett@ibc.com).**

Erin Welch, will confirm date and hours of event.

**Please Note: It will be your responsibility to set up and clean the facility before/after your use (discard trash, put furniture back in order, etc).  
Thank you for your cooperation!**

#### Office Use Only

Number of Guest Attended: \_\_\_\_\_

Date Used: \_\_\_\_\_

Room Cost: \_\_\_\_\_

Meal Cost: \_\_\_\_\_

Security Cost: \_\_\_\_\_

Set Up Fee: \_\_\_\_\_

Music Cost: \_\_\_\_\_

Liquor Cost: \_\_\_\_\_

Misc. Cost: \_\_\_\_\_

Approving Officer Signature: \_\_\_\_\_