

Booking Application For:

Rockford Mass Transit District (RMTD)
East Side Transfer Center *COMMUNITY ROOM*
725 N. Lyford Road; Rockford, IL 61107

Date of Application _____

Name of Organization: _____

Contact Person: _____

Address: _____ (street)

_____ (city, state, zip code)

_____ (phone)

Cell: _____ Work Phone: _____

.....
Date(s) of Meeting: _____

Hours of Meeting: _____ (Beginning/End Time)

How Many Attendees Expected: _____ (Maximum Capacity Seats up to 50)

Set-Up Style of Tables/Chairs: _____

Type of Meeting/Program: _____ Informational _____ Membership _____ Other

If "other" Please Describe

Will you need use of any equipment? (Projector for example) _____

Will you need Wi-Fi? _____

Please List any Special Requirements: _____

Unlimited Coffee (for an additional cost of \$5.00) Yes or No?: _____

Do you plan to bring in refreshments? If so, please list: _____

I state the above information is true and correct. I further state that I have received a copy of the Policy adopted by the Board of Trustees of the Rockford Mass Transit District, that I and my organization will abide by and comply fully with that Policy at all times, and that I (and the above group, club, organization, if applicable), shall indemnify and hold harmless the Board of Trustees of the Rockford Mass Transit District from and against any loss, cost, expenses or damages occasioned by the use of RMTD ESTC Community Room and/or our failure to follow any part of the Policy.

Signature of Applicant

*Please return completed application to Erin Jenkins at ejenkins@RMTD.org or Fax 815-961-9892