

Date of Inquiry: \_\_\_\_\_Via\_\_\_\_

## 548 Puddintown Road • State College, PA 16801 (814) 235-7819 • www.CRPR.org

Actual Event Time: \_\_\_\_\_ - \_\_\_\_

## **Facility Rental Request Form**

Ken	tai Date:		(including set-up and clean		
Facili	ty Use/Event:			-up)	
	act Person/Title:			<del></del>	
	nization:				
# of visitors: Phone: Email:					
Addr	ess:				
<b>√</b>	Facility	<b>Date</b> (if multiple days)	<b>Time</b> (if multiple facilities)	Fee	Total
	Barn			First 2 hours: \$165 Additional hours:\$25	
	Pavilion  Instructional Use of			First 3 hours: \$60 Additional hours:\$10 Permit required; Fees	
	Grounds			vary	
	Projector and/or Projector Screen			\$10 each	
	Alcohol Permit/Refundab	Permit: \$100 Deposit: \$200			
For A	dministrative Use Only:				
Additional Notes:				Checklist:	
				<ul><li>□ Calendar</li><li>□ RecDesk Entered:</li><li>□ Invoice Sent</li></ul>	
Initial facility tour:				<ul><li>☐ Insurance Provided</li><li>☐ Tent Policy</li></ul>	
Tables/chairs:				□ Paid:	
Entertainment: Food:				□ Waiver Signed	
Keys:				☐ Receipt Sent	
Caterer insurance:				☐ Calendar Updated	
				☐ Alcohol Policy Signed	
Alcohol pre-event walkthrough: Alcohol post-event walkthrough:				☐ Credit Card Authorization	
	ce #	Permit #		☐ Alcohol Deposit Re	etund
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