



*Request Form for Use of Meeting Room*

Name of Requestor(s): \_\_\_\_\_

Date for which room is requested: \_\_\_\_\_

Time: \_\_\_\_\_

Requestor's Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

Email: \_\_\_\_\_

Requestor's purpose of use: \_\_\_\_\_

\_\_\_\_\_

Number of persons expected: \_\_\_\_\_

Special provisions/equipment needs: \_\_\_\_\_

\_\_\_\_\_

*I am a member of Atlantic Telephone Membership Corporation. I have been informed of the guidelines for use of the meeting room and do hereby agree to follow those guidelines. In addition, I assume responsibility for the appropriate, safe and orderly use of the meeting room on behalf of my group/organization.*

\_\_\_\_\_

Name

\_\_\_\_\_

Address

\_\_\_\_\_

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

Approved by: \_\_\_\_\_

ATMC Representative

\_\_\_\_\_

Date