Forsyth County Senior Services

Facility Use - Event Order

Primary Contact: _____

Phone: _____ Email: _____

Address: _____

Secondary Contact: _____

Phone: _____ Email: _____

Date & Time Requested: _____ Estimated Attendees: _____

Event Type: _____ Event Name: _____

Organization/Group Name: _____

Arrival Time: _____ Departure Time: _____

Facility use is not reserved until a meeting has taken place and fees have been paid.

Please return this form to rentals@forsythco.com or the front desk.

STAFF ONLY			
Items/Rooms	Rate	Hours/ Time	Total
Other			
A/V Package			
Set-Up Fee			
Cleaning Fee			
		Total Fees:	
		Damage Deposit:	$350.00
		Total Due:	

FCSS Staff: _____

User: _____

Payment Due Date: _____ Date Paid: _____