

REQUEST FOR COMMUNITY ROOM RESERVATION

Community Room A: \$50.00
Community Room B: \$50.00
Kitchen: \$50.00
Township Meeting Rm \$100.00

Please make checks payable to Montgomery Township - Charge: _____
Deposit: _____
Total Due: _____

Requestor / Contact Person: _____

Day Phone Number: _____ Night Phone Number: _____

Address: _____

Organization/Group: _____

Number of People attending: _____

Date and Time Room(s) Needed for: _____

Selection of Room Desired (If any): _____

Selection of Kitchen (If Desired): Yes/No (Please Circle One)

THIS RESERVATION IS SUBJECT TO THE APPROVAL OF TOWNSHIP AUTHORITIES

GROUP MUST PRESENT CERTIFICATE FOR LIABILITY INSURANCE

