

FACILITY RESERVATION REQUEST FORM

Please complete and submit this form to Leah Jayne via e-mail (ljayne@ahumc.org) at your earliest convenience for final approval. Your request will be followed by a quote (if applicable), once approved. If you have any questions, please call 210-826-3215 ext 111).

Organization: _____ Today's Date: ___/___/___

Date(s) Requested: _____ Time of event: _____ to _____

Time room is needed: _____ to _____

Contact Person: _____ Phone #: _____

E-mail Address: _____

Billing Address: _____

Description of Event **(please note that, due to the pandemic and extra cleaning & disinfection cautions required, we will be offering limited rooms, set up options, equipment and are not able to offer coffee & water set up):**

Equipment Request: _____

Catered by: _____ None

Number of Attendees: _____

Please use back of form to draw your desired set-up. You can schedule a visit with Leah Jayne for assistance with deciding on a set-up.

<p>AHUMC Admin Only: Rec'd Form: ___/___/___ Approved ___/___/___ Denied _____ Conf. Sent ___/___/___ Calendars _____</p> <p>Quote sent: ___/___/___ Quote approved ___/___/___</p> <p>Agreement sent: ___/___/___ Agreement signed: ___/___/___ COI Rec'd ___/___/___ Invoice Sent ___/___/___ Payment rec'd ___/___/___</p>
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