

Wakefield Foundation
P.O. Box 8 Wakefield, VA 23888
(757) 899-2365
Building Rental Form

PLEASE ANSWER ALL QUESTIONS:

Name of Family/ Organization: _____

Specify event to be held: _____

Explain what funds will be used for: _____

Event Date: _____

Beginning time: _____ Ending Time: _____

Set-up Time: _____

Additional Request: _____

Contact person for this event: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone # : Home: _____ Work: _____

Will Alcohol be served at this event () Yes () No - If answer is yes, an ABC PERMIT.

Will you require use of the Kitchen () Yes () No, You are only allowed to reheat food.

If you cancel your event, written notification must be received at least five (5) working days prior to the scheduled event. Failure to comply will result in a required payment of 1/2 rental fee.

Signature: _____ Date: _____

This Facility will not be available for usage for the purpose of discrimination against race, religion, or national origin as this the law as a result of the Civil Right Act of 1964.

FOR OFFICE USE ONLY:

Building Rental:

Auditorium: (\$450.00) _____

Gallery: (\$200.00) _____

Conference Room: (\$ 100.00) _____

Set-up after 5:00pm / day before Event: (\$50.00) _____

Total Amount Due: _____

Deposit Received: _____ **Date:** _____

Balance Due: _____