

Temple Israel

91 Springside Drive

Akron, OH 44333

Phone: 330-665-2000

Fax: 330-665-2003

***Please circle one or both:*** → **Community Calendar Request Temple Israel Calendar Request**

All changes, additions and cancellations must be submitted **in writing** to Kylee Burdohan at the Temple main office.

Name of Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ New Request? \_\_\_\_\_ Previous Request? \_\_\_\_\_

Name of Event \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Event \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Start Time \_\_\_\_\_\_\_\_ (AM or PM) End Time \_\_\_\_\_\_\_\_ (AM or PM)

Location of Event \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Set-up needed by \_\_\_\_\_\_\_\_ (AM or PM)

Room Request: Yes \_\_\_ No \_\_\_ **(IF YES, THE INFORMATION BELOW MUST BE COMPLETED)**

**CANCELLATION OF EVENT**: Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Submitted by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If Temple area is being used, the following information MUST BE completed.**

Social Hall \_\_\_\_\_ Library \_\_\_\_\_\_ Meeting Room \_\_\_\_\_

Other (Please explain) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**We do not provide food for meetings or events.**

**Indicate the number of the following items needed:**

\_\_\_\_\_ High Chairs \_\_\_\_\_ Microphone with Stand

\_\_\_\_\_ 72" Round Tables \_\_\_\_\_ Easels \_\_\_\_\_ Wireless Microphones

\_\_\_\_\_ 6' Rectangular Tables \_\_\_\_\_ Podium with Microphone \_\_\_\_\_ Digital Projector

\_\_\_\_\_ 8' Rectangular Tables \_\_\_\_\_ Screen \_\_\_\_\_ DVD/VHS Player

\_\_\_\_\_ Chairs \_\_\_\_\_ Television \_\_\_\_\_ CD Player

\_\_\_\_\_ Ceremonial Objects (Please list) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ Laptop Computer

Coffee Set-up \_\_\_\_\_ Yes \_\_\_\_\_ No Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Security Needed \_\_\_\_\_ Yes \_\_\_\_\_ No

After-hours Staff Needed \_\_\_\_\_ Yes \_\_\_\_\_ No

Additional Comments \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Please complete room layout on reverse side.**