



Memorial Auditorium Tables & Chairs Rental Form

Rental Information

Date Requested: _____

Return Date & Time: _____

Pick up Date & Time: _____

Location of Event: _____

Contact Person Information

Name: _____

Organization: _____

Address: _____

Phone Number: _____

City/Zip: _____

Alternate Phone: _____

Date: _____

Signature: _____

CHAIRS

Color Description

Requested X Price

Brown Plastic (about 190) _____ X \$0.65 = \$ _____

Grey Cushion Seats & Backs (about 175) _____ X \$0.85 = \$ _____

BANQUET TABLES

Size Description

Requested X Price

6ft Grey (25) _____ X \$6.00 = \$ _____

6ft White Lightweight Top (7) _____ X \$6.00 = \$ _____

5ft Round White (12 available) _____ X \$8.00 = \$ _____

30"x42" Round Cocktail Table (10) _____ X \$6.00 = \$ _____

Deposit of \$50.00

Total Amount Due: \$ _____

*Delivery Fees are additional and are calculated according to individual travel distance.

Payment Information
Date Paid: _____
Amount Paid: _____
Payment Type: _____
Chamber Initials: _____

Notes: