



ROOM RESERVATION REQUEST

Must be reserved a minimum of 24 hours prior to reservation

THE EVENT MAY NOT BE ANY LONGER THAN FOUR (4) HOURS TOTAL.

DATE _____

DATE OF EVENT _____ TIME OF EVENT _____ TO _____

Name of Applicant (Contact Person)

Address

City _____ State _____ ZIP CODE _____

Home Phone _____ Cell Phone _____

Email _____

Brief Description of Event _____

Anticipated number attending _____

Please drop this application off at the Community Center at One Wilderness Boulevard (across from the guard gate off Old Tampa Road) or email to: onsitemgr@rwhoa.org .

I understand that the River Wilderness Community Center is a community facility and I (we) do not have sole use of this space.

FOR OFFICE USE ONLY

CONFIRMED: ___ River ___ Wilderness ___ Parrish ___ Florida ___ Manatee ___ Other

ROOM SET UP: ___ Classroom ___ Square ___ Executive ___ Other