



The Family Center Room Rental Request

Today's Date: _____

1. Agency Name: _____
2. Host Name (designated individual from agency): _____
3. Conference Room preference: _____
4. Contact Info (please provide phone, email and fax): _____

5. Date and time needed: _____
6. Expected number of people: _____
7. Reason for space usage: _____

8. Will food be provided (explain): _____

9. Audio Visuals: _____

CRITERIA FOR USE:

- A. FIRST COME, FIRST SERVED (provided space is available for the dates requested)
- B. There must be an opportunity for future collaboration between the interested group/agency and The Family Center.
- C. One person from the outside group/agency must be identified to act as a Host. Host duties include: room setup, food provisions, ushering of guests to the space provided, and room cleanup.
- D. At check-in participants will be asked to sign-in: Name, Agency, E-mail and Time in.
- E. The outside group/agency will allow The Family Center to give a brief orientation of the services provided at the center.
- F. The Family Center will setup a resource table displaying TFC materials.
- G. Meetings cannot begin before 8:30 AM and must end by 7:50 PM (Fridays 4:50 PM)
- H. We authorize two free monthly community meetings on a first come, first served basis.
- I. All Room Rental Request Forms must be E-mailed or faxed to The Family Center. Fax: 617-625-2351 or E-mail: info@thefamilycenterinc.org

NOTE: You will receive confirmation via fax as to whether or not request was approved by The Family Center.

PLEASE NOTE: The Family Center does not provide parking in our lot. All attendees must use street parking in the surrounding area.

ALSO: Please do not use tape on The Family Center walls for presentations. We will provide dry erase board for your convenience.

Room assigned: _____ Approval: _____

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HOST
WANDA MAISONET