□ New	Cornerstone Room Request Form					
☐ Cancel	(Completed form required for event approval)					
☐ Change ☐ C	Community Room	rd Room			l Computer Lab	
Event and Conta	act Information					
Date of Function: Date Entered:						
Requesting Organ	ization:			•		
Phone: Email:						
Address:				City/St:	Z	Zip:
Contact Name:				<u>, ,,</u>	Į.	'
Phone:						
		Email:				
Event Details Please note: Any changes to this form should be submitted to Denice Crawford - dcrawford@canetwork.org or 817-632-6010						
Event Start Time:	AM	PM	Event End	Time:	AM PN	И
# Guests Expected	d:		Setup Star	t Time:	AM PN	Л
Equipment: 🗆 Le	ecturn 🗆 Micro	phone \square	LCD Project	or 🗆 Lapto	p 🗆 Interne	et Access
Room Setup*: ☐ Square ☐ U-Shaped ☐ Classroom ☐ Theater/Lecture ☐ Banquet						
*Board Room, Training Room, and Computer Lab have fixed setups. Dry-Erase boards are available in the Board Room, Training Roand Computer Lab. User must provide markers/erasers.						
Additional Tables: Sign-in/Reception Display: # needed Food Service Table (when providing your own food)						
Table Covers: ☐ CAN Linens (See pricing below) ☐ Will provide own						
Table Centerpieces: CAN Will provide own						
Will you be serving food/drinks? □ No □ Cornerstone Catering □ Provide our own □ Beverage Service Only (\$1/person)						
Please provide the name/phone number of your caterer: Linen Prices: 52"/\$2.00 61"/\$2.50 72"/\$3.00 85"/\$5.50 10'/\$5.50 Tables Skirts: \$2.50/sq foot Napkins: \$.25 each; \$.50 with flatware. Linens must be ordered 3 weeks in advance to ensure availability.						
Other Requirements/Information:						
Staples, push pins, nails, or other items that will damage the walls, carpet, or furniture are not allowed to						
be used for decorating. Damage fees may be assessed if these items are used.						
Cornerstone Office Use						
Request Submitted:						
☐ Contract Received / Event approved						
☐ Calendar checke	☐ Added to CAN Calendar By: Date:					
☐ Staff assigned for	☐ Security Confirmed					
Fees Assessed:			•			
			leage: ¢		□ Table Ca	was ¢
☐ Food Services: \$		□ Room U		:d		
	ceived				□ Invoiced	☐ Received
Deposit \$		•	/Damage Ch	_	☐ Security Fe	
□ Invoiced □ R	eceived	☐ Invoiced	l 🗌 Rece	ivea	□ Invoiced	□ Received