## PLACER COUNTY VETERANS MEMORIAL HALL RESERVATION QUESTIONNAIRE

1. Which Veterans Memorial Hall are you interested in renting and what areas?

Kitchen rental is required if food/drinks are present. NO Kitchen only reservations allowed. **Auburn** Lincoln ☐ Upstairs Dance Hall ☐ Dining Room ONLY (Must be a meeting with no Downstairs more than 20 people/no more than 4 hours) ☐ Kitchen ☐ Entire Hall (Main Hall, Dining Room, Kitchen) ☐ Fireside Room (holds 20) ☐ Entire Hall (Upstairs, Downstairs, Kitchen) Colfax Loomis ■ Main Hall ONLY ☐ Meeting Room (holds 20) & Kitchen ☐ Entire Hall (Main Hall, Kitchen) ■ Main Hall ONLY ☐ Entire Hall (Main Hall, Meeting Room, Kitchen) **Foresthill** ☐ Entire Hall ☐ Main Hall ☐ Small Room Roseville ☐ Kitchen ■ Main Hall (Auditorium) ☐ Large Barbecue Area ☐ Basement ☐ Small Barbecue Area ☐ Kitchen ☐ Gazebo ☐ Service Office ☐ Concrete Dance Pad 2. What is the date you would like to reserve? 3. Select a timeframe you would like to reserve the hall - times must include set-up and clean-up. For Auburn, Colfax, Foresthill, Lincoln and Loomis: ☐ 6:00am - 1:00am ☐ Other: For Roseville, please note TWO timeframes are available. Rental rates are PER TIMEFRAME. ☐ 6:00am - 2:00pm (Rsvl Basement/Kitchen) 8:00am - 5:00pm (Rsvl Auditorium) 5:00pm - 1:00am (Rsvl Auditorium) 2:00pm - 10:00pm (Rsvl Basement/Kitchen) 4. What is the estimated number of people that will be present? 5. What type of activity is your event? ☐ Celebration of Life ☐ Anniversary Party ■ Graduation ■ Baptism ■ Birthday Party ■ Wedding Reception ☐ Business Meeting Quinceanera ☐ Other

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6.	Will alcohol be present at	the event?		Yes		No
	Will alcohol be sold at the	event?		Yes		No
7	Mill for all an abstable by a second			V		No
1.	Will food or drinks be pres If yes, Kitchen rental is requ			Yes	_	No
	, ,					
8.	Will you be charging your guests to attend?			Yes		No
9.	What form of payment do you anticipate using for this reservation?					
	lacksquare cashiers check					
	money order					
	credit card (Pa	yment instructions will be included with the	e reser	vation a	ppli	cation)
10	Applicant's Name:					
10.	-					<del></del>
	Physical Address:					
	Mailing Address:					
	(if different)					
	Telephone Number:					
	Email Address:					
	Name of Group:					
	(if applicable)					
	Co-Applicant**					<u></u>
		ant is paying for this reservation they will need to sign Applicant. Please mark "N/A" if this is not applicable)	the rese	rvation a	oplica	tion as a
11.	How would you like the re	servation application sent to you?				
	Email					
	U.S. Mail					
	I UNDERSTAND THIS IS <u>NO</u>	OT AN APPLICATION AND DOES <u>NOT</u> GU INTENDED FOR INFORMATIO				RESERVATION. THIS QUESTIONNAIRE IS NLY.
	Signature:					
	Jignature.					

Please submit this questionnaire electronically, or by mail to 11476 C AVENUE, AUBURN, CA 95603, ATTN: Memorial Hall Coordinator