**V.G. JAMES & EXTENSION CONFERENCE CENTER**

**FACILITY RESERVATION FORM**

Preliminary Request:

1. Person Making Request: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Proposed meeting Date: \_\_\_\_\_\_\_\_\_ Start Time: \_\_\_\_\_\_\_\_\_\_\_\_\_ End Time: \_\_\_\_\_\_\_\_\_\_
2. Anticipated Number Attending: \_\_\_\_\_\_\_\_\_\_\_\_
3. Organization Conducting Meeting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Subject of Meeting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Meal Served: Yes: \_\_\_\_\_\_\_\_ No: \_\_\_\_\_\_\_\_\_ Kitchen Use: Yes \_\_\_\_\_\_\_\_\_ No: \_\_\_\_\_\_\_\_\_
6. **Set Up:**

The conference room is set up in a classroom style. You are more than welcome to stop by and see if that will work for your event. If you choose to rearrange the table & chairs, then you are responsible for setting them back up in the "classroom style” immediately after your event. Currently we are not able to utilize the petition to divide the room; we ask that you do not pull the petition out.

1. Signature: By signing I acknowledge that I have received and read the use policy governing use of this facility and the waiver statement below and understand that I/we are responsible for compliance with these policies.

**Please note that a $50.00 CLEANING FEE WILL BE CHARGED IF FACILITY IS NOT LEFT IN ACCEPTABLE CONDITION**.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Waiver Statement: The undersigned as representatives for the user organization does hereby release North Carolina State University, the Trustees and all officers and agents of said North Carolina State University of any and all responsibility or liability, claims or demands resulting from injury or personal property damage sustained by the user organization members or personal injury or property damage of others caused by the user organization or because of participation in this organization reservation.

**Action Taken**

1. Fee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Make checks payable to **NCSU**.

Send to: Vernon James Center, 207 Research Station Rd., Plymouth, NC 27962

Concluding Information

 1. Actual Number Attended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 2. Caterer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 3. Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Conference Center Guidelines:**

The conference center will only be available to nonprofit agricultural, educational and governmental groups by request, between the hours of 8 a.m. and 5 p.m., Monday through Friday. Fees for rental are as follows:

* 50 – 100 people –    $75.00
* 101 – 150 people – $125.00
* 151 – 200 people – $175.00

Checks for rental should be payable to **NCSU** and mailed to the Vernon James Center, 207 Research Station Rd., Plymouth, NC 27962.