## NON–PROFIT EVENT REQUEST FORM Thank you for your interest in Andrews House, a 501c3 non-profit help-giving community center. To guarantee your reservation, please fill out the information below and return this form, along with a \$20 non-refundable deposit. An invoice will be mailed prior to your event. ANDREWS HOUSE PEOPLE STRENGTHENING PEOPLE Date(s) requesting: 39 West Winter Street Name: Delaware, OH 43015 740.369.4520 Organization: www.andrewshouse.org Address: info@andrewhouse.org Phone: \_\_\_\_\_\_ Email: \_\_\_\_\_ Purpose: Anticipated number attending: Adults: Children: Time of Event: (Billing time will include the total amount of time that the room(s) will not be available to other parties) Clean up will end at:\_\_\_\_\_ Set up will begin at:\_\_\_\_ Beginning time:\_\_\_\_\_ Ending time: Room(s) requested: Great Room & Dining Room (\$30/hour) Nicely Room—Small Conference Room (\$12.50/hour) Kitchen (\$20/hour) (\$15 flat fee when renting other rooms) Liability Insurance Policy & Holder Number Some events may require a liability certificate naming Andrews House as an "additional insured." I understand that I am responsible for set-up, clean-up, and any damage that I or my group cause in the building or on the grounds, and that I will be assessed an additional fee for not doing so. Signed Date Would you like to receive our newsletter? Yes No

EMERGENCY PHONE NUMBERS:

If your event is held during non-business hours and there is an Emergency situation, please call one of the following:

Mel Corroto: Shelly Emans 740-971-3489 740-975-4402

For Onice Use:	
Deposit Amount:	
Date Received:	