



# USAG Bavaria

## Conference Room Usage Request Center Hours 0900-2300

Requestor Name

\_\_\_\_\_

Last, First MI.

Requestor Unit or Organization

\_\_\_\_\_

Event Date Primary

\_\_\_\_\_

Event Date Alternate

\_\_\_\_\_

Number of Patrons

Patton Room (up to 100 personnel)

Eisenhower Room (up to 200 personnel) 50 per section

Macarthur Room (up to 20 personnel)

Grant Room (up to 45 personnel)

Contact #

\_\_\_\_\_

Purpose of Event

\_\_\_\_\_

FRG, HAIL and FAREWELL ECT....

Event Start Time

\_\_\_\_\_

Event End Time

\_\_\_\_\_

### AREA MUST BE CLEAN PRIOR TO EVENT END TIME

Is Food Being Served

Use of the Tower View Kitchen is not authorized

YES\*

NO

\*If yes you must provide clean up detail

Are Alcoholic Beverages Being Served

Use of the Tower View Bar is not authorized other than FMWR

YES\*

NO

\*If yes you must contract with FMWR

Additional Information for the Request

Disclaimer use of facility constitutes acknowledgement of responsibility for any damages that occur from patrons use of the facility

\_\_\_\_\_  
Requestor Signature