



WCMHR, Inc. Research Station Reservation Request

Name of Event _____

Host/Contact Name _____ Date of Event _____

Occupy Start Time (Include Setting Up) _____ Leave Time (Include Clean up) _____

Host Phone Number _____ Host Email Address _____

1. How many people will be attending? _____

2. Please check which of the following gathering options needed for the event:

Board Room (Seating Max 20 People) _____ Large Auditorium (Seating Max 220 people chairs & tables) _____

Large Auditorium (Seating Max 470 people chairs only) _____ Outside Designated Area _____

3. Will your event need access/use of the kitchen on premises? Yes No

4. Any Audio and Video (AV) needs? Yes No

If Yes Fill Below AV Needs Box

AV Needs:

5. Any other Needs or Requests for Event/Meeting? Yes No

If Yes Fill Below Needs or Request Box

Needs or Requests:

6. Invoice to be made to Name & Address:

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Download form to your computer first. Once form is complete click the email button below and send form to the Station Admin for scheduling. Admin will confirm reservation, send contract, and invoice any cost associated for the event to the Host/Contact Email. ****This form DOES NOT support Microsoft edge and phone device apps. Form and submission of form must be done on desktop or laptop computers.**

Email

Please return form to Patricia Parsons at pparsons@petersonfarmsinc.com