



Please return 3 weeks before your retreat by email to your Retreat Coordinator, or fax to (831) 335-7726

## Wellsprings Meeting Room (Page 1 of 2)

Church/Organization: \_\_\_\_\_

Dates and times of use

Retreat Date: \_\_\_\_\_

1. \_\_\_\_\_

Group size: \_\_\_\_\_

2. \_\_\_\_\_

Please indicate the function of this meeting room:

Main Meeting Space  Breakout  Kids Classroom  Other: \_\_\_\_\_

**Room Set-Up** : All setups include furnished tables and chairs.

Please indicate the desired set-up format. If a custom set-up is desired, please draw on the meeting room layout page (2/2).

<input type="checkbox"/> Theater	<input type="checkbox"/> Reception	<input type="checkbox"/> Semi-Circle	<input type="checkbox"/> Craft	<input type="checkbox"/> Board Room
No. tables: ____ (max 1)	No. tables: ____ (max 1)	No. tables: ____ (max 1)	No. tables: ____ (max 4)	No. tables: ____ (max 4)
No. chairs: ____ (max 30)	No. chairs: ____ (max 20)	No. chairs: ____ (max 15)	No. chairs: ____ (max 30)	No. chairs: ____ (max 20)

## Audio/Visual Requests

### Available Equipment

- Flatscreen TV with VGA and HDMI connections
- DVD

### Additional equipment by request

- Flipchart & markers
- Whiteboard & markers

Please list equipment group will be bringing:

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Size: 13'x36'

