



Please return 3 weeks before your retreat by email to your Retreat Coordinator.

Redwood Chapel (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

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 2)	No. tables: ____ (max 2)	No. tables: ____ (max 2)	No. tables: ____ (max 5)	No. tables: ____ (max 4)
No. chairs: ____ (max 80)	No. chairs: ____ (max 50)	No. chairs: ____ (max 40)	No. chairs: ____ (max 50)	No. chairs: ____ (max 30)

Audio/Visual Requests

Available Equipment

- Sound System: 4 Channel
- Mixer
- TV with HDMI connection

Please list equipment group will be bringing:

Additional equipment by request

- Microphone Sets: quantity ____ (max 4 inputs)
- Music Stands: quantity ____ (max 4)
- Direct Box (max 1)
- DVD Player
- Ipod Connection
- Whiteboard
- Flip Chart

REDWOOD CHAPEL

Meeting Room

Room Size 24' x 40'

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