



# 4-H Club and Project Meeting Facilities Use Form

Club/Group: \_\_\_\_\_

Contact Person: \_\_\_\_\_  
 (Person completing this form, making facility arrangements)

Contact Phone (\_\_\_\_\_) \_\_\_\_\_ e-mail \_\_\_\_\_

Please contact the facility you wish to use to set date and determine if they will require a certificate of insurance or a contract. **DO NOT SIGN CONTRACTS!** Please attach a copy of the contract, it must be reviewed and signed by the County Director. Submit contract with this form.

- The location does not require a contract or certificate of insurance.
- The location requires a contract, was mailed/faxed on (date) \_\_\_\_\_
- The location requires a certificate of insurance

Facility/Agency Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/Zip \_\_\_\_\_

Facility Contact Person: \_\_\_\_\_

Facility Contact Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

**The following information is often required by the facility:**

Approximately how many adults are expected? \_\_\_\_\_ How many youth? \_\_\_\_\_

Room(s) Requested (include kitchen if needed):

On-site equipment needed (chairs, tables, PA system, electrical access, etc.):

Will the facility be setting equipment up? \_\_\_\_\_

Event Set-Up Time: \_\_\_\_\_ Departure Time: \_\_\_\_\_

**Scheduled meetings (keep holidays and facility calendars in mind):**

Month	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Day of Week												
Date												

Allow 10 to 14 days for processing of additional dates and times for existing insurance agreements. New agreements may take longer.

**Submit forms: Placer County 4-H Office, 11477 E Avenue, Auburn CA 95603 or Fax: 530-889-7397**  
**Questions regarding facilities use? Contact: Farm Advisor's Office at 530-889-7385**