



## ROOM RESERVATION FORM

**Official Mission/Squadron Functions:** Commander's Calls, Meetings, Training, ALS, & Quarterly Awards

**Private Use Include:** Personal Parties, Promotion Ceremonies, Retirement Ceremonies, Luncheons, Private Organization Fundraisers (*Revenue generating*) & social clubs.

**Personal Information:**

First Name:		Last Name:	
Squadron:			
Work Phone:		Phone:	
Email:		City, State, Zip:	

**Alternate POC:**

First Name:		Last Name:	
Email:			
Work Phone:		Phone:	

**Event:**

Types	Days & Hours	Fees
Official Mission/Squadron Functions	Mon - Fri / 8am - 5pm	<b>Free</b>
Private Use	Mon - Sat / 8am - 11pm	Based on Room

**Fees Based on Room(s):** *Set up for decorations is 2.5 hour prior to event*

Room	Fees <i>(Includes setup &amp; teardown)</i>
Large Ballroom	\$75.00
Ballroom	\$50.00
Conference	\$45.00
DV Room	\$45.00

**Please, fill in this form and send it directly to the Dakota's Community Center at: Email: [28FSS.Community.Center@us.af.mil](mailto:28FSS.Community.Center@us.af.mil) or Call (605) 385-1780 / (605) 385-1781**



## EVENT DETAILS

Event Type: \_\_\_\_\_

Event Description: \_\_\_\_\_

\_\_\_\_\_

Date(s): \_\_\_\_\_ Number Attending: \_\_\_\_\_ Total Cost: \_\_\_\_\_

Start Time (Includes setup): \_\_\_\_\_ End Time (Includes teardown): \_\_\_\_\_

**Service/Items Needed:** (Checkmark which items you are requesting)

Tables     Chairs     Podium     Use of Audio System     Use of Projector

Use of Stage/Dance Floor     Will bring Cake\*     Catering\*     Bar\*

\*Cake/dessert is the only item allowed to be brought in at the Dakota's Community Center.

\*Catering and bar services are available through Dakota's Club – See back sheet to for catering information.

### Credit Card Information:

*In order to confirm your reservation, please provide your credit card information.*

Card Type:		Name on Card:	
Card Number:		Expiration Date:	
Customer Signature:			

Cancellations must be made within 48 hours of your event by contacting Dakota's Community Center Staff.

Customer Initial: \_\_\_\_\_

Customer Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Customer Signature: \_\_\_\_\_

Community Center (Manager / Programmer) Signature: \_\_\_\_\_

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