

Doyle Elementary School Event & Room Reservation

For the following event: _____

Names of Parents/Visitors expected to attend:

I would like to reserve the

Cafeteria Gym Conference room

Flex Room Classroom _____ Other _____

Date: _____ From : _____ To: _____

Please set up:

Chairs: _____ Tables: _____ Podium: _____

Please specify set-up:

If AV equipment needed - please specify:

Requested by: _____ Date: _____

Principal Approval: _____ Date: _____