Rental Information	
Previous invoice # (if renewing)	
Location preferred	Alternate location(s)
Areas required (gym, classroom, etc)	
Start & end date of event(s)	Reoccurring? (daily, weekly, monthly)
Start & end time(s) (including set up & take down)	
Name of primary contact	Job title
Location employed	Phone number(s)
Email address(es)	Event description
Additional Information # of participants Parking required?	Yes No Name of onsite contact