



RESERVATION REQUEST FORM

Please use a separate form for each event.

TODAY'S DATE _____

ORGANIZATION (if applicable) _____

NAME (of person signing contract) _____

PRIMARY CONTACT (if different) _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____

EMAIL _____

The CCC schedule is available at www.lctix.com/creative-center. *Schedule is subject to change.*

Type of Rental Request (choose all that apply to this event):

WEEKLY GALLERY RENTAL

AFTER HOURS GALLERY RENTAL

Select Gallery: A B C D

EVENT RENTAL – HERITAGE COURTYARD

IDEA LAB RENTAL

ART CLASS RENTAL

EVENT RENTAL – GALLERY

PERFORMANCE RENTAL

Dates for Gallery Rental: _____

Date(s) for Event Rental (Gallery reception or other event): _____

Event time:

Set-up begins: _____ Event starts: _____ Event ends: _____ Clean-up ends: _____

Short description of event (i.e., gallery exhibit, music performance, fund-raising event, wedding, etc.):

Email or deliver this form to Deb Catlow at dcatlow@fcgov.com

Or deliver to Community Creative Center, 200 Mathews St., Wed-Sat. 12-6pm. Please check the calendar at <http://www.fcgov.com/creativecenter/calendar.php> to confirm the building will be open.

Or call for further information: 970-416-2069 during business hours.

Event requests are taken on a first-come, first-served basis, whether by email, phone or in-person. Reservations are not considered confirmed until full payment of fees and a signed contract are received.

Do not send payment with this form. This form serves as the initial request for dates/rooms.