

Roseville Area Chamber of Commerce

Entered _____
Emailed _____

Conference Room Agreement (filled out annually)

THIS FORM MUST BE SIGNED AND RETURNED 24 HOURS IN ADVANCE OF USE DATE ACKNOWLEDGING ACCEPTANCE OF THE RULES, ASSUMING RESPONSIBILITY FOR THE ROOM AND FOR THE CONDUCT OF THE GROUP.

Organization Name: _____

Estimated Attendance: _____

Contact Person: _____

Phone Number: _____ Email: _____

Signature: _____

Responsible Person On-Site: _____

Please remember that it is acceptable to park in our lot while loading and unloading your car for your meeting, but we ask that everyone using our rooms park off-site to allow for normal Chamber business activity.

Please be sure to instruct your attendees to park off-site prior to your scheduled meetings.

**I have read and agree to the conditions stated in the Policy for use of the Chamber conference rooms, included but not limited to the following:

Please initial: _____ 1. I understand that only one (1) meeting attendee may park in the Chamber parking lot (this includes the side parking lot in the alley.) All other meeting attendees are required to park off-site.

Please initial: _____ 2. I understand that conference rooms are to be used only by the business that is a member of the Roseville Area Chamber of Commerce.

Please initial: _____ 3. I understand that the conference rooms are available Monday through Friday, 8:45am- 4:45pm.

Please initial: _____ 4. I understand that my company is allowed to book a conference room 10 hours per month at no charge and that rooms not cancelled 24 hours in advance will be counted as used.

Please initial: _____ 5. I understand that reservations cannot be made more than three (3) calendar months in advance.

Please initial: _____ 6. I understand that failure to show without 24-hour notice will result in the meeting time being counted toward the 10 hour maximum per month.

Please initial: _____ 7. I understand that I am responsible for all trash removal and will leave the room in the same condition as it was found.

Please initial: _____ 8. I understand that my company must provide all refreshments and utensils for my meeting.

Please initial: _____ 9. I understand that my meeting is to be self-contained and I am responsible for bringing my own equipment.

Please initial: _____ 10. I understand the use of the facility is confined to the conference rooms and front restrooms only.

Please initial: _____ I understand that each member is allowed to use the conference rooms at no charge for up to 10 hours per month. After 10 hours have been used in the same month, my account will be billed \$25 for each additional hour used.

Thank you for adhering to our guidelines!

Please return to: Roseville Area Chamber of Commerce info@rosevilleareachamber.com
650 Douglas Blvd. Roseville, CA 95678 | Phone: 916-783-8136 | Fax: 916-783-5261