

CONFERENCE ROOM REQUEST FORM

Dated: _____

Re: Premises: 400 Garden City Plaza, Conference Room, Garden City, New York

From: _____

We understand that charges will be applied for the use of the Conference Room as follows:

- Regular business hours are \$125.00 per hour.
- After hours use will be billed at a rate of \$250.00 per hour.

We would like to request the use of the conference room on the following dates and times:

_____	_____
Date	Time

_____	_____
Date	Time

_____	_____
Signature	Print Name

Approved _____

Not Approved _____

_____	_____
Signature	Date