

# Hindu Temple of Rochester

120 Pinnacle Road, Pittsford, NY 14534-1008

Phone: (585) 427-8091

[www.hindutempleofrochester.com](http://www.hindutempleofrochester.com)

DOWNSTAIRS HALL

ROOM \_\_\_\_\_

## RESERVATION FORM

Date of Use: \_\_\_\_\_ Hours needed: \_\_\_\_\_ to \_\_\_\_\_ Total \_\_\_\_\_

Date of Setup (if different): \_\_\_\_\_ Hours needed: \_\_\_\_\_ to \_\_\_\_\_ Total \_\_\_\_\_

Purpose: \_\_\_\_\_ No. of Guests: \_\_\_\_\_

HTOR member for current year (Y/N)

Organization Event: Yes No Organization: \_\_\_\_\_

### Optional:

How many Microphone(s) will you be needing (if any) \_\_\_\_\_

Would you like to rent any tables (round) from the temple? Yes No

Would you like to rent any plates, glassware, cutlery etc. from the temple? Yes No

### DETAILS OF THE PERSON RESERVING THE HALL

Name \_\_\_\_\_ E-mail: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Today's Date \_\_\_\_\_

**Read and Initial if in agreement:**

I have read and agree to all the guidelines. \_\_\_\_\_

I will inform **ALL** of my guests of the guidelines and the code of conduct of the Temple. \_\_\_\_\_

I will leave the Hall and the premises of the Temple in a clean and acceptable condition. \_\_\_\_\_

I agree to the Refund Policy of the Temple. \_\_\_\_\_

I agree to pay any fees incurred by the Temple, if my checks are returned because of insufficient funds. \_\_\_\_\_

\*\*\*\*\*

**FOR TEMPLE USE ONLY**

Deposit Amount Paid: \_\_\_\_\_ Cash/CC/Check # \_\_\_\_\_ Date \_\_\_\_\_

Usage Amount Given: \_\_\_\_\_ Cash/CC/Check # \_\_\_\_\_ Date \_\_\_\_\_

Reservation Approved: Date: \_\_\_\_\_ By: Name \_\_\_\_\_

Priest Services:      Yes                      No                      Services Form Filled:      Yes                      N/A

Guidelines Form Handed:      Yes                      No

Date of Cancellation w/o penalty \_\_\_\_\_ w/ 20% penalty \_\_\_\_\_ w/ 50% penalty \_\_\_\_\_