

## Pevely City Hall Boardroom Request Form

Name:	Phone:		
Address:			
Email Address:			
Date Requested:	Time Requested:		
Reason for room usage:			
Room requested (circle one):	Room A	Room B	BOA Room
Day of Contact:			
Name:	Phone:		
BY SIGNING BELOW, I (WE) AGREE TO ABID CONDITIONS PLACED ON THIS PERMIT. THE INJURIES		OT LIABLE FOR ANY DA	
Applicant signature:		Date:	
When arriving for your afterhours reservation who signed is responsible for letting Dispatch be locked. Failure to do so will result in cand	ch know when the r	ental is over so that t	he building doors can
Approved by:	Date:		