

Meeting Room Reservation Request Form

Customer or Authoriz	ed Agent Name				
Birthdate		Gender			
Phone		Email			
Home Address					
City			State	Zip Cod	e
Organization/ Compa	iny Name				
Nonprofit Tax ID#					
Address					
City			State	Zip Cod	e
County Department			Division		
GL Index	GL Sub Object		JL Key		JL Object
Date(s) Requested					
Time Requested		to		Including all set u	ıp and clean up time.
Number of People	This includes your guests, staff, volunteers, and vendors.				
Facility	 Aptos Village Park The Lorenzo Room at the Highlands House Quail Hollow Ranch Valencia Hall 				
Add-ons	 Kitchen Smart Television (Aptos Village Park and Highlands House only) 				

I have read and understand all policies detailed in the Conditions of Use. I agree to the cancellation policy.

Requestee Signature

Date

Please submit this form by email or at our office at the address above.

Please see our Conditions of Use and Rental Rates documents at scparks.com for more information.