## EVENTS/ FACILITY RENTAL CHECKLIST

(FOR EVENT SET UP AND DAY OF EVENT)

1.	EVENT/ RENTAL DETAILS					
	Date of event					
	Time of the event					
	Number of attendees					
	Space(s) rented					
	Lessee's name					
	Lessee's contact number					
2.	. Set up					
	Tables? (Total requested)					
	Seating? (Total requested)					
Any additional requests?						
Spa	ice layout:					

## 3. AV/ MEDIA REQUESTS

☐ Audio Sound		IMAG Screens	☐ Live Streaming		Portable TV/ Monitor	
Additional requests:						

## 4. DIAGRAM OF SETUP

## SANCTUARY SET UP

