

City of Fairfield
Parks & Recreation Department
Internal Reservation Form
Return to pr-rentals@fairfield.ca.gov

Meeting Title: _____

Reservation Requested By: _____ Ext: _____

Department and Manager: _____

Designated Staff in charge/present during event: _____

Date of Event: _____ Estimated Attendance: _____

Setup Time: _____ Event Start Time: _____ Departure Time: _____

Facility/Room Requested: _____ Wi-Fi Access: Yes No

Equipment/Special requests: (Paper, markers, flash drives, cables, remotes/pointers are not provided)

Weekend/Holiday uses require payment of facility attendant fees at \$30/hour. Please provide account code for journal transfer: _____

— FOR RESERVATION OFFICE USE ONLY—

Date Approved: _____ Approved By: _____

Date Entered: _____ Entered By: _____

Equipment Use Confirmed with Building Staff: _____

Wi-Fi Login Issued: _____ Journal Entry Requested for fees: _____

Date Setup Received: _____ Completed Date: _____