

Day of Event Form

Please fill out this form & <u>RETURN 2 WEEKS PRIOR</u> to your event. Meetings & Events: (360) 676-2500

Name/Organization:	
Facility: _The Fishermen's Pa	vilion Event Date:
Name & cell number of Person	on in Charge to check in and out with Port Staff:
I will meet Port staff at	for the building to be opened.
 I anticipate having the build (no later than 12 a.m.) 	ding properly cleaned and vacated by
scheduled closing time you departure.	ILDING UNATTENDED! If you are done prior to your u are required to call Port staff to lock the building prior to your
•	r down time is included in your open/close times. our stated open time may result in an additional call out fee.
Customer Signature:	Date:
Available Equipment	
60"	Round Tables (12)
6' Rectangular Banquet Tables (22)	
Chairs (80)	
Picnic tables (8)	

Set-up and tear-down/clean-up is the customer's responsibility

4 Trashcans, brooms and dust pan