

### **Dauphin Recreation Services**

Box 195, 200 1st St. SE Dauphin, Manitoba R7N 2V1 Phone: 622-3150 Fax: 622-3199

www.dauphinrec.com

## Facility Request Form – Strilkiwski Lounge

Organization Name:				
Start Date & Time:	End Date & Time:			
Event Name (if any):				
Number of Guests:				
Will you have a caterer at your event	?	Yes	No	
Who will be catering your	event?			
What time will the caterer b	be arriving to the facility?			
Do you plan to serve alcohol at your event?		Yes	No	
Select the length of time for the renta  Hourly Half Day (up to 4 hours) Full Day (4+ hours)  Select the following basic amenities to	\$45.00 (includes tables, chair \$145.00 (includes tables, chair \$235.00 (includes tables, chair	s, projector, projector scr s, projector, projector scr		
Please Note: Dauphin Recreati	ion Services <u>does not</u> supply extenare not listed below.		ease inquire about other am	enities you
Projector & Projector Screen Easel/Flipchart with Paper Bartender hours Corkage/Person	\$30.00 \$10.00 \$23.50/hour/bartender \$5.00	Coffee & T	'ea Service (per serve) e	\$25.00 \$50.00
List any other requests here:				
				-
Select the preferred table and chair la	yout:			_
Banquet U-Shape Theatre	Conference Classroom Other (please attach with this fo	rm)		



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# **TABLE AND CHAIR LAYOUTS**

<b>-</b>	
BANQUET	CONFERENCE
U-SHAPE	CLASSROOM
THEATRE	OTHER
	<ul> <li>All room layouts can be set up with 8' banquet tables or 5' round tables</li> </ul>
	Banquet tables seat a maximum of 8 people
	Round tables seat a maximum of 8 people



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Dauphin Recreation Services is not responsible or reliable for any claim, in any way caused by, arising out of, or resulting from any disease or contagion, including but not limited to COVID19. By reading and signing this document, you agree that Dauphin Recreation Services is not responsible or liable for COVID19 related illness.

Thank you for your interest in hosting your event with Dauphin Recreation Services! We will follow up with you to confirm details prior to your event.

Representative Name:	
Contact Number:	
Email Address:	
Billing Address:	
Zimig Hadress.	
All Design	
Today's Date:	
Representative Signature:	

Please send your Facility Request form to:

Dauphin Recreation Services c/o Assistant General Manager Lindsey Kyle Box 195, 200 1<sup>st</sup> St. SE Dauphin, MB R7N 2V1 Email – events@dauphinrec.com