David Braley Health Sciences Centre

Room Booking Request Form 100 Main Street West, Hamilton ON L8P 1H6

Email Requests To: mhcroombooking@mcmaster.ca



PLEASE CHOOSE ONE: ☐ External/Non-Academic ☐ Internal/Academic Account number: ☐ MSU Student Group ☐ City of Hamilton — DBHSC Public Health MAC01 ☐ City of Hamilton – Other Departments *If a registration fee is being charged the event will be considered external for billing purposes. **Contact Information** First & Last Name: Department: Program: Phone: Email: Billing Address: **Event Information Event Name:** Date: **Setup Time: Start Time: **End Time: Room Preference:** Amount of people: Catering/Setup Information Available for rent: 8x4" tables, 4x6" tables and 100 chairs **Catering Company:** Catering tables: Cocktail Tables:

^{**}Setup time must include when any deliveries (catering or rentals) need to be made and this is the time the doors will electronically unlock.

Sketch/Notes of Room Setup:	
FOR 2032 please indicate bleachers to be setup or put away	
FOR 2035/2036 please indicate if the wall should be down for 2 rooms or up for 1 large room	
Audio Visual Requirements	
(If not specified you may not be able to use equipment on the day of your booking)	
□ Zoom	☐ Teleconference
☐ Video Conference	☐ Screen & Projector
□ OTN	☐ Sound System/Mics (2032 only)
Other Av Comments:	
Other Av Comments:	
Office Use Only	