



VERITAS HALL
DOMINICAN CATHOLIC SCHOOL
114 Chalan Pale Ramon Lagu Rt. 1
Yigo, Guam 96929
Phone: (671)653-3021/3140 Fax: 653-3090

RESERVATION REQUEST FORM

Date: _____

Name of Organization: _____

Address: _____

Contact Person(s): _____ Phone: _____ Fax: _____

_____ Phone: _____ Fax: _____

Date(s) requested: _____ Time(s) From: _____ To _____

_____ From: _____ To _____

TYPE OF ORGANIZATION:

- | | |
|----------------------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Private |
| <input type="checkbox"/> Nonprofit | <input type="checkbox"/> DCS Student/Parent/Organization |
| <input type="checkbox"/> Government of Guam Agency | <input type="checkbox"/> Other: _____ |

FACILITIES REQUESTED:

- | | | | | |
|-------------------------------------------|-------------------------------------------------|----------------------------------------------------------|----------------------------------------------|--------------------------------|
| <input type="checkbox"/> Main Arena (Gym) | <input type="checkbox"/> Classroom 1 | <input type="checkbox"/> Classroom 2 | <input type="checkbox"/> Concessions | <input type="checkbox"/> Stage |
| <input type="checkbox"/> Classroom 3 | <input type="checkbox"/> Private/Meeting Room 1 | <input type="checkbox"/> Private/Meeting Room 2 | <input type="checkbox"/> Liturgical Fixtures | |
| <input type="checkbox"/> DCS Cafeteria | <input type="checkbox"/> Lights & Sounds | <input type="checkbox"/> Equipment (Example: Microphone) | <input type="checkbox"/> Video Wall | |
| <input type="checkbox"/> Camera | <input type="checkbox"/> Mezzanine 1 | <input type="checkbox"/> Mezzanine 2 | <input type="checkbox"/> Kiosk/Covered Stage | |

Will you be selling programs, wares, and/or merchandize: ☐ Yes ☐ No

Purpose of the Event: _____

FOR OFFICIAL USE ONLY

\$300.00 NON REFUNDABLE RESERVATION DEPOSIT PAID: ☐ YES ☐ NO

Date paid: _____ Amount Paid: _____ Payable to: Dominican Catholic School

☐ Cash ☐ Business/Personal Check ☐ Credit Card

Veritas Hall available upon request: ☐ Approved ☐ Disapproved

VERITAS HALL DIRECTOR: _____ Date: _____