

**Athens Community Center
Reservations Form**

Present Date: _____

Name: _____

Address: _____

Email: _____

Phone: (hm) _____ (wk) _____

(cell) _____ (fax) _____

Organization: _____

Type of Event: _____

Date of Event: _____

Time: _____

Attending: _____

Room: _____

Alcohol Permit: F2 F

Rate Quoted: _____

Meeting: _____

Special Arrangements: