# Virginia Housing Center (VHC) Reservation Request Form



# NAME OF ORGANIZATION/COMPANY:

# **CONTACT INFORMATION**

Primary POC

Name:

Title:

Business Number: Mobile Number:

**Email Address:** 

# **Alternate POC**

Name:

Title:

**Business Number:** 

Mobile Number:

**Email Address:** 

### **EVENT INFORMATION**

**Event Title:** 

Start Date:

End Date:

Type of Event:

**Description:** 

#### **PROJECTED ATTENDANCE**

#### Attendee Breakdown

Virginia Housing Associates/Contractors:

Virginia Housing Board Members:

Virginia Housing Leadership:

**External Guests:** 

#### Total Number of Attendees:

Number Auto Calculated from Attendee Breakdown

1 of 2

#### **RESERVATION REQUEST**

Room Request (# of Occupants):

# Virginia Housing

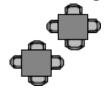
#### **PREFERRED SEATING**

Theatre/Auditorium (Chairs Only)

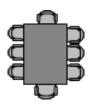
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**U-Shape** 

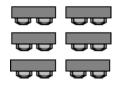
Pods (Seating 4 or 6)



Boardroom



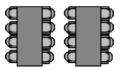
Classroom (Chairs and Tables)



Hollow Square



Banquet



Other (Specify):

# **AUDIO/VISUAL NEEDS**

None

**Internet Access** 

Laptop

Projector

Wireless Handheld Microphone

Wireless Lapel Microphone

Wireless Loop System for

the Hearing Impaired

**Podium** 

Power Strips

Presentation Clicker/Remote Control

**Laser Pointer** 

**Electronic Whiteboard** 

Flip Chart with Markers

Conference Call Capability

Meeting Owl Camera & Microphone Polycom

Speaker Phone

Webex

# **CATERING:**

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