

Wilbur Wright Birthplace
1525 N. C.O. Rd. 750 E.
Hagerstown, IN 47346
www.wwbirthplace.com
(765) 332-2495



wilbur@wwbirthplace.com

COMMUNITY ROOM RESERVATION FORM

DATE: _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

RESERVATION DATE: _____

TIME NEEDED: _____ AM/PM TO _____ AM/PM

COSTS:

DEPOSIT: \$20.00 TO BE PAID AT TIME OF RESERVATION * PAID: \$ _____

RENTAL FEE (\$50 FOR MEMBERS \$75 FOR NON-MEMBERS) PAID: \$ _____

SPECIAL PRICED TOURS: ADULTS (\$2) # ATTENDING _____ PAID: \$ _____

STUDENTS (\$1) # ATTENDING _____ PAID: \$ _____

RULES OF COMMUNITY ROOM

1. No decorations etc., to be taped or nailed to the walls
2. No smoking in the building
3. No alcoholic beverages
4. Trash to be taken with you
5. Floor is to be swept. (Vacuum provided)
6. Wash off tables and countertops
7. Please be respectful to the exhibits and grounds

* The deposit will be returned if all of the Community Room Rules are honored within 30 days after the event. The deposit will also be returned if the reservation is cancelled 2 weeks prior to the reservation date.

WW0003 FORM