



# District Education Center Board Room Setup Requirements

Please submit Board Room Setup form at least 48 hours prior to date of meeting. We understand special needs may occur without warning. Maintenance and Operation Secretary will review your request to ensure set-up is scheduled.

Date Submitted: \_\_\_\_\_ Name: \_\_\_\_\_ Meeting Title: \_\_\_\_\_

Meeting Date: \_\_\_\_\_ Meeting Time: \_\_\_\_\_ Number of attendees: \_\_\_\_\_

Office Extension: \_\_\_\_\_ Other phone number: \_\_\_\_\_

### SELECT SETUP AND NUMBER OF CHAIRS:

**LARGE SQUARE** Number of Chairs: \_\_\_\_\_  
*Maximum 36*

**SMALL SQUARE** Number of Chairs: \_\_\_\_\_  
*Maximum 20*

**U SHAPE**  Number of Chairs: \_\_\_\_\_  
*Maximum 30*

**U SHAPE TABLE FRONT** Number of Chairs: \_\_\_\_\_  
*Maximum 30*

**MANAGEMENT TEAM** Number of Chairs: \_\_\_\_\_  
*11 Tables and 40 Chairs*

**THEATER CHAIRS ONLY** Number of Chairs: \_\_\_\_\_  
*Maximum 70*

Which direction should chairs face: Main Screen:  Side Screen:

Do you need tables for food service: YES  NO  If yes how many: \_\_\_\_\_ (max 3)

Special Setups: (draw/describe your special setup needs below in the space provided):