



## Decatur Active Living Facility Request Form

Facility Requested – Check One

\_\_\_ Decatur Recreation Center, 231 Sycamore Street, Decatur 30030

\_\_\_ Ebster Recreation Center, 105 Electric Avenue, Decatur 30030

Room Requested \_\_\_\_\_ Date Requested \_\_\_\_\_

Time Requested \_\_\_\_\_ Expected Attendance \_\_\_\_\_

Name/Organization \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Purpose

I understand that this request form **does not guarantee** that the room and facility requested is available for rental on the date and time requested. No reservation will be confirmed until a Rental Agreement is signed by both the renter and Decatur Active Living Staff. Requests must be made at least two weeks before the anticipated date.

Signature \_\_\_\_\_ Date \_\_\_\_\_