

EVENT DATE: _____

Sun City Civic Association
26850 Sun City Blvd. Sun City CA 92586
951-679-2311
SPECIAL EVENT FORM

Member Name: _____

Property Address: _____

Phone: _____ Email: _____

SCCA Member Number: _____

Name of Club/PSO (if applicable): _____

Facility Requested: Please mark with an X:

Webb Hall (50-175 people)*		Trophy Room (5 to 45 people)	
North Town Hall (50-175 people)*		Lawn Bowls Room (5 to 25 people)	
Civic Hall (40-106 people)		East Room (30 people)	

*More people if less tables used

Event Details:

Type of Event _____ Number of Guests _____

Caterer _____ Entertainment _____

If professional services are provided at event, there are insurance and certification requirements that are required.

Event Day: _____ Date: _____ Time: _____ am/pm to _____ am/pm

Set-Up Day: _____ Date: _____ Time: _____ am/pm to _____ am/pm

Will alcohol be served? Yes No (If, yes requires SCCA Board Approval)

Equipment Requested – Please check and/or write number needed of the following:

Round Tables	Podium	Other:
Long Tables	Sound System*	
Card Tables	Microphone	
Chairs	Projector & Screen	

*Sound System is not to be changed or moved, this will be set up prior to your arrival.

Please provide table and equipment set up for the requested room with this form and no less than two (2) weeks prior to the event. Submit the facilities request as soon as your date is certain. Cancellations and changes must be made in writing 2 weeks (14 days) prior to the event date requested. Questions? Please call the SCCA at (951) 679-2311.

Facilities and equipment shall be left clean and in good order. Use the attached Room Clean-up Check List to ensure you are not charged a \$150.00 cleaning fee. Any damage to SCCA property will be charged to the member.

Member's Signature _____ Date _____

Board of Directors Approved Date _____

Association Representative Signature _____ Date _____