



Yuma Community Food Bank  
 Carol M. Oden Conference/ F. A. Braden Board Room  
 Reservation Form

Today's Date:	
Organization:	
Point of Contact:	
Phone:	
Address:	
Email:	
Requested Dates:	

Reoccurring:	Daily:	Weekly:	Monthly:	Yearly:
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Secondary Point of Contact	
Name:	
Phone:	
Email:	

Number in Party: \_\_\_\_\_ Conference – max 153/Board – max 20

Please check all that apply: **Conference Room / Board Room**

Duration:            Half Day \_\_\_\_ Full Day \_\_\_\_            **Fee:** \_\_\_\_

Key Deposit:        Yes \_\_\_\_        No \_\_\_\_            **Fee:** \_\_\_\_ (required for after business hour events)

**Total Paid:** \_\_\_\_ (**Receipt#** \_\_\_\_\_)

Support Equipment:

Tables: quantity needed \_\_\_\_\_  
 Chairs: quantity needed \_\_\_\_\_  
 Podium

**\*\*\* Non- Profit Organizations must submit a copy of their 501 (C) (3) form \*\*\***

Yuma Community Food Bank  
 Memorandum of Agreement  
 Carol M. Oden Conference/F. A Braden Board Room



Thank you for choosing to have your event at the Carol M. Oden Conference/F. A. Braden Board Room. In order to provide adequate support for your event and to have it be a successful one, the following guidelines are in place:

1. Organization will take full responsibility for any damage to facility or assets provided. (Tables, Chairs, Podium, etc).
2. Cancellations must be received a minimum of 24 hours prior to the event scheduled; when the cancellation does not occur timely, the full price of the room will charged and billed accordingly. This policy will apply to all reservations including nonprofit organizations. After the second occurrence, including recurring events, the Food Bank reserves the right to remove the reservation/event from the schedule and the organization will not receive priority when requesting future dates.
3. If an event takes place after business hours the organization must ensure all outside entranceways are locked and lights and air conditioning are turned off upon its completion.

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I have reviewed the information on the reservation form and find it to be correct. I agree to the guidelines set forth in this Memorandum of Agreement.

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Signature

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Print name

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Date



## Fee Schedule

### **For-Profit Businesses, Civic or Social Groups**

#### **Carol M. Oden Conference Room – max 153**

\$80 for a half day – less than 4 hours

\$135 for a full day – more than 4 hours.

Set up fee for Conference Room - \$25.00

\$50.00 deposit required upon booking; refundable with 48 hour cancellation



#### **F. A. Braden Board Room – max 20**

\$25.00 for half day

\$50 for a full day

Set up, if required, \$10.00

\$25.00 deposit required upon booking; refundable with 48 hour cancellation



A \$25 key deposit is required if a key is needed for set up during non-business hours.

Food is not allowed in the conference or board rooms.

### **Non-Profit Organizations**

Fees are waived for non-profit organizations who can provide a copy of their 501(c)3.

Key deposit and are required.