



Tucson Chinese Cultural Center Facilities Form

Renter Information

Non-Profit Organization Name: _____

Full Name: _____

Last

First

M.I.

Address: _____

Street Address

Apartment / Unit #

City

State

ZIP Code

Tax ID #: _____ Phone: (____) _____ Fax: (____) _____

E-mail: _____

Best Time to Reach You: 9:00 AM - 12:00 PM 12:00 PM – 5:00 PM Other

Rental Information

Date of Rental: _____ Time of Rental: _____

Purpose of Rental: _____

Number of People: _____

Rent: Classroom(s): Yes No **If Yes, Quantity:** _____

Multipurpose Room: Yes No Kitchen: Yes No

Outdoor Areas: Yes No Basketball Court: Yes No

Others, please specify: _____

Furniture Usage: Yes No **If Yes, Quantity:** _____

Audio/Visual Equipment Usage: Yes No **If Yes, Quantity:** _____

Below Section Is For Internal Use Only

Rental Cost: \$ _____ Security Deposit: \$ _____

Liability Insurance Certificate: Yes No

Comments: _____

Signed Approval: _____

Tucson Chinese Association

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