Room Rental Request and Agreement

We are requesting temporary use of the STA Large Group Room to be used by:__________________________ (name of group) for:_______________ (date(s)). From: ________ (am/pm) to: _______ (am/pm).

We request use of this room for ____________ (number of days). From: ________ (am/pm) to: _______ (am/pm).

We ask that between the months of June and September 1st the room be vacant and picked up by 3pm, and between the months of October and May the room be vacant and picked up by 5pm. Our Office is closed by 3pm during summer and by 5pm during the school year.

By filling this form out you are not automatically locked in to use the facility, please wait for a response. If you do not receive a response within a two day period, please call our office at 315-472-6374.

*Once approved, if you decide to use another location, we require ample written notice.

Room use approval (STA) ____________________________    Date Approved:_____________

Please submit this form in advance to fax number 315-472-6379, or email to abarry@syrteach.org.
The following is to be handed out at the beginning of your PD/Meetings. If you have different members each day, we ask that you hand this document out each day.

1. Please help us keep the bathrooms clean.

2. Cell phone use must be used in back staircase or front elevator hallway- not the STA hallway or reception area.

3. Please tidy up after yourselves.

4. Please be aware that our halls echo, in order to preserve confidentiality, we ask that you be mindful of noise levels while on break.

5. Coffee is available in the reception area and in the Large Group Room, please be respectful and keep this area clean.

6. There is a refrigerator and microwave in the Large Group Room, provided for your convinience.

*Please note, by agreeing to these terms and conditions, you are agreeing that your group will abide.

Trainer/ Educator ______________________________________________

A copy of this signed form can be made for your attendees to read during introductions.