

Temple Beth Tikvah
1600 N. Acacia Avenue ☆ Fullerton, CA 92831
Phone (714) 871-3535 Fax (714) 871-4051
Email: info@tbtoc.org

FACILITY USE APPLICATION

A copy of your Homeowners Insurance must be submitted to the Temple office at least one week prior to event.

TODAY'S DATE: _____

NAME: _____

(if wedding, please list name of bride and groom)

ADDRESS: _____

TELEPHONE: _____ EMAIL: _____
(home) (work) (cell)

DATE OF EVENT: _____ TYPE OF EVENT: _____

SET-UP TIME: _____ START TIME: _____ OUT TIME (end time plus clean up): _____

APPROXIMATE NUMBER OF ATTENDEES: _____ TEMPLE BETH TIKVAH MEMBER? _____

ROOMS REQUESTED: Sanctuary _____ Social Hall/Kitchen _____ Patio _____

SIMCHA CHAIRS: _____ CHUPAH: _____

CATERER'S NAME: _____

CATERER'S TELEPHONE: _____

DEPOSITS: An advance deposit of \$100 plus a security fee of \$250.00 must accompany this application.
FINAL PAYMENT must reach Temple Office seven days prior to event.

Signatory acknowledges and agrees to abide by the Temple Beth Tikvah Facility Use and Procedures which are incorporated by reference as fully set forth herein.

SIGNATURE: _____

OFFICE USE ONLY

MEMBER IS CURRENT _____ TBT STAFF REPRESENTATIVE _____

TOTAL DUE: _____ BREAKDOWN: _____

DATE: _____ CHECK # _____ AMOUNT: _____ BALANCE DUE: _____

DATE: _____ CHECK # _____ AMOUNT: _____ BALANCE DUE: _____

DATE: _____ CHECK # _____ AMOUNT: _____ BALANCE DUE: _____

CC# _____

EXP. DATE _____ SEC. # _____

NAME FOR RETURN DEPOSIT: _____ MAIL OR PICK UP: _____

SECURITY DEPOSIT RETURNED: _____

(Signature)

(Date)