



at Lancaster

## APPLICATION FOR USE OF FACILITIES AND SERVICES

Please complete the following questions and return to Eastern Mennonite University at Lancaster Office.  
Thank you for choosing EMU as the site for your meeting room and/or classroom needs.

1. Organization: \_\_\_\_\_
2. Date Needed: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date Time In Date Time Out

Recurring reservation: \_\_\_\_\_

3. Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Email: \_\_\_\_\_@\_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

4. Please explain the type of activity which you will be sponsoring:  
\_\_\_\_\_
5. Number expected to attend: Adults \_\_\_\_\_
6. Please add any comments or additional needs of your group.  
\_\_\_\_\_  
\_\_\_\_\_

**Insurance Requirement:** All rentals require certification of liability insurance, with a coverage limit of not less than \$1,000,000.00. Such policy shall name Eastern Mennonite University at Lancaster, 1846 Charter Lane, Lancaster PA 17601 as Additional Insured with respect to the Licensed Premises and shall contain contractual liability coverage. You must submit a copy of the insurance certificate to Eastern Mennonite University at Lancaster in order to receive approval for rental agreement.

Return form to:

Julie R. Siegfried  
Office Manager  
Eastern Mennonite University at Lancaster  
1846 Charter Lane, PO Box 10936  
Lancaster PA 17605

Phone 717-397-5190  
Fax 717-397-5281

2/25/2011

Email: [julie.siegfried@emu.edu](mailto:julie.siegfried@emu.edu)