

Selkirk & District Community Learning Centre
Facility Booking Request

Company/Organization:_____

Company Phone Number:_____ Fax:_____

Company Address:_____

Contact Name:_____ Phone:_____

Room Requested:_____

Items Available:

TV/VCR_____

Overhead Projector_____

PC Projection_____

Flip Chart with Paper_____

Photocopy Service_____

Coffee_____

Date(s) for Reservation

Start Date:_____ End Date:_____

Times Required:_____

Room Set Up: A-Large Square_____

B-Small Square_____

C-Board Style_____

D-Theatre Style_____

E-Classroom Style_____

F-Chair Circle_____

Number of People Attending_____

Complete and return booking requests either by mail or fax to:

Selkirk & District Community Learning Centre

122-511 Robinson Ave.,

Selkirk, MB R1A 1E5

Fax: (204) 785-1316

Web site: selkirklearningcentre.ca