



## Meeting Room Request Form

Company Name \_\_\_\_\_  
Booth Number \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Telephone \_\_\_\_\_  
Email \_\_\_\_\_  
Address \_\_\_\_\_

Date(s) of Meeting(s)      Tuesday 11/2      Wednesday 11/3  
   Thursday 11/4      Friday 11/5

Total Cost      \_\_\_\_hour(s) x \$150/ hour= \_\_\_\_\_      OR      \_\_\_\_day(s) x \$750/ day= \_\_\_\_\_

Preferred Meeting Time(s)      Start Time \_\_\_\_\_ am / pm      End Time \_\_\_\_\_ am / pm

Meeting Purpose \_\_\_\_\_  
Estimated Attendance \_\_\_\_\_

Special Needs \*      Food/ Beverage      Audio Visual      Other \_\_\_\_\_

\*All additional room expenses, including food/beverage, audio visual, and room set changes, will be billed to you directly through the appropriate vendor.

Type of Room Set      Classroom      Theatre      Reception      Other \_\_\_\_\_

Due to limited amount of space, approval will be based upon availability. All requests will be reviewed in a timely manner after receipt of the completed form. Room request pricing can vary based on individual requirements. Full payment of invoice must be paid in full 30 days prior to the event.

**DEADLINE: August 20, 2021**

Email: [courtney.baker@usa.messefrankfurt.com](mailto:courtney.baker@usa.messefrankfurt.com)

**Official use only:** Please note verbal approvals will not be granted. Approvals must be submitted in writing.

PE Events, LLC. approved meeting details:

Date(s) & Time(s) \_\_\_\_\_

Location \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_