



**Royal Military College of Canada Messes  
Function/Facility Request Agreement**

**Section A: Contact Information**

1. Function Name:	
2. CF1 Number (TBA):	
3. Function OPI:	
4. Point of Contact:	
a. Cell Number:	
b. Email:	
c. Mailing Address:	
d. Date Of Birth	

**Section B: General Requirement Info**

1. Proposed Date:	
2. Proposed Times:	
3. Estimated # of Attendees:	
4. Rooms Requested:	<input type="checkbox"/> Dining Room
	<input type="checkbox"/> Coggins Club
	<input type="checkbox"/> Bar
	<input type="checkbox"/> Lounge
	<input type="checkbox"/> Patio
	<input type="checkbox"/> Commandants Room

**Section C: Funding / Payment Information**

Budget for Event	\$
Type of Event:	<input type="checkbox"/> Mess Dinner
	<input type="checkbox"/> Mess Event
	<input type="checkbox"/> Commandant VIP Event
	<input type="checkbox"/> College Wide Event
	<input type="checkbox"/> Unit/ Section/ Departure Event
	<input type="checkbox"/> D.W.D.
	<input type="checkbox"/> Coffee Break / Briefing
	<input type="checkbox"/> Other:
Payment Format:	<input type="checkbox"/> Public Funds
	<input type="checkbox"/> Cheque/ Cash/ Credit Card
	<input type="checkbox"/> AQR
	<input type="checkbox"/> NPF SSM Acct #
	<input type="checkbox"/> Cadet Mess Acct #
	<input type="checkbox"/> NPF Unit Fund #
	<input type="checkbox"/> Commandant Fund G.L.
	<input type="checkbox"/> Funds for Foundation
	<input type="checkbox"/> By the PSP Coordinator
<input type="checkbox"/> By the OPI	

**Section D: Bar Requirements** (Check one or more below)

	Bar Service Required?
	Bar Opening hours
	Bar Closing hours
Special instructions (I.E. Wine with dinner)	

**Section E: Food Requirements** (Check all that apply)

	Pass around appetizers
	Dinner Buffet
	Dinner Table Service
	Lunch Buffet
	Lunch Table Service
	Breakfast Buffet
	Finger Food Buffet
	Coffee/ Dessert
	Other:
	Culinary Preferences:
	Please Indicate any Dietary Requirements for guests:

**Section I: Mess Confirmation**

<p>Event Has Been Confirmed by:</p> <ul style="list-style-type: none"> <li><input type="radio"/> Andy Sakell, Mess Manager(X6654)</li> <li><input type="radio"/> SSM Committee Member</li> <li><input type="radio"/> Lori Alves-MacPhail, Assistant Mess Manager(X6722)</li> </ul> <p>Function Approval Signature _____</p> <p>Date: _____</p>
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