



MASONIC CONFERENCE CENTER



DETAILED REQUEST FOR USE

Complete and send to Event Planning Dept at Masonic Village

At Least three weeks prior to the start date of your program

GROUP NAME: _____

PROGRAM TITLE _____

EARLIEST ARRIVAL: ____/____/____

TIME: _____

Should be the time your planning committee arrives on campus

LATEST DEPARTURE: ____/____/____

TIME: _____

GROUP REGISTRATION TIME: _____

CHECK-OUT TIME: _____

ESTIMATED TOTAL NUMBER OF PARTICIPANTS: _____

EXACT HOUSING COUNT DUE TEN (10) DAYS PRIOR TO ARRIVAL

IF YOUTH GROUP - ESTIMATED NUMBER OF ADULT LEADERS: _____

ESTIMATED NUMBER OF YOUTH ATTENDEES: _____

PROGRAM COORDINATOR _____

TELEPHONE # () _____

EMAIL: _____

GROUP EMERGENCY CONTACT when on campus: _____

TELEPHONE # () _____

Room Assigned: _____

DESCRIPTION OF ACTIVITIES _____

Please attach a tentative schedule of activities

FACILITIES REQUESTED: (CHECK APPROPRIATE AREAS)

MEMORIAL HALL:

- FIRST FLOOR DORM ROOMS** (11 Rooms / 40 Beds incl. 6 Top Bunks)
- SECOND FLOOR DORM ROOMS** (8 Rooms / 32 Beds incl. 12 Top Bunks)

- DINING ROOM** (24 Tables 8 Chairs per Table. Capacity 192)
 - Change to Head Table with Podium**
(Max.of 8 at Head Table. Room Capacity changes to 160)
 - Access to audio System** with CD / Tape / Radio Capabilities
 - Table linens requested** (state which meal needed)

- WILLIAMSON MULTIMEDIA CENTER** (Seating capacity of 100)
PROGRAM NEEDS

- Microphones**
- Computer Access**
- Internet Access**
- Other:** _____
- DVD / CD Player**
- Sound for laptop/computer**
- HDMI Access**

PLEASE DESCRIBE HOW ROOM WILL BE USED: _____

- LOBBY** State what will be needed: _____

PROVIDE FLOOR PLANS IF ROOMS NEED CHANGED FROM NORMAL SETUP

- M-118** Boardroom Style Change to: _____
with pull down screen and portable projector
- M-117** Boardroom Style Change to: _____
with large television and HDMI connection / phone availability
- M-116** Classroom Style Change to: _____
with pull down screen and portable projector
- M-115** Classroom Style Change to: _____
with pull down screen and portable projector
- M-114** Classroom Style Change to: _____
with pull down screen and portable projector
- M-113** Classroom Style Change to: _____
with large television and HDMI connection

If rooms need divider walls opened or closed, please state this request otherwise walls will remained closed between rooms

- FUNCTION ROOM** (Select Style and Amount)
(state number of attendees per setup needed)
 - Lodge for _____
 - Theater for _____
 - Classroom for _____
 - Other _____

Provide floor plan

Program Needs

- Projector**
- Microphones**
Wired / Wireless
- DVD**
- Sound for laptop/computer**
- Other:** _____
- Computer Hookup**
- Internet Access**
- HDMI Access**

ITEM

REQUESTED

Cabinet #1

3 Sets of Spike Ball

Cabinet #2

Black garden hose

Cabinet #3

Washer toss

3 sets of Can Jam w/ frisbees

Ladder Golf w/ extra balls

Corn hole beanbags

Cabinet #4

2 sets of Golf Chipping games

1 putting mat

1 Putter Rack w/ 4 putters

Bag of Golf Balls

Cabinet #5

Top Shelf:

Fly Swatters

Floating Ball game

Extra Basketball nets

Clothesline

Middle Shelf:

3 in 1 carnival Set

Table top Fooseball

Tin Can game

Outdoor Giant Dice game

Outdoor chess set

Bottom Shelf:

Ping Pong Paddles

Ping Pong Balls

2 Rink Toss Games

Rubber Marking Spots

ITEM**REQUESTED****Cabinet #6 & #8**

- 3 Portable Soccer Goals
- Portable pickleball set
- 2 Croquet sets
- 2 sets horseshoes
- Bucket with large rope

Cabinet #7Top Shelf:

- 9 Wooden Lawn games
- Orange Flags

Middle Shelf:

- Wiffle Ball bats
- Wiffle Balls
- Rubber bases
- Pitching Rubber

Bottom Shelf:

- Tennis Rackets
- Tennis balls
- Pickleball Rackets
- Pickelballs

Cabinet #9Top Shelf:

- Container of rope
- Plastic bin of Soccer shin guards

Middle Shelf:

- Bocce Ball set
- Klask game
- Large Jenga Set
- Wooden Outright Right/Center/Left game

Bottom Shelf:

- Wooden Tabletop Sling puck/shuffleboard game
- Jump ropes

Cabinet #10

- Bag of Frisbees
- Xtra Large Outdoor Jenga Set
- Bag of plastic balls
- Wash Baskets

MENU SELECTIONS FOR THE MASONIC CONFERENCE CENTER ELIZABETHTOWN, PA

PROGRAM:	
GROUP:	

Snack:

Day: _____

Date: _____ Category A: _____

Time: _____

Count: _____

Breakfast:

Day: _____ Category A: _____

Date: _____ Category B: _____

Time: _____ Category C: _____

Count: _____ Category D: _____

Note: When choosing a cold breakfast option – choose only categories C & D.

All special dietary issues should be reported with the final counts one week prior to the program so that proper arrangements can be made to provide appropriate selections.

Lunch:

Day: _____ Category A: _____

Date: _____ Category B: _____

Time: _____ Category C: _____

Count: _____ Category D: _____

Category E: _____

Dinner:

Day: _____ Category A: _____

Date: _____ Category B: _____

Time: _____ Category C: _____

Count: _____ Category D: _____

Category E: _____

Snack:

Day: _____

Date: _____ Category A: _____

Time: _____

Count: _____

Breakfast:

Day: _____ Category A: _____

Date: _____ Category B: _____

Time: _____ Category C: _____

Count: _____ Category D: _____

Note: When choosing a cold breakfast option – choose only categories C & D.

All special dietary issues should be reported with the final counts one week prior to the program so that proper arrangements can be made to provide appropriate selections.