

## **TCF Reservation Form**

NOTE: An extra thirty (30) minutes will be added to the beginning and end of meetings scheduled in Potomac A-D to allow for setup/breakdown of the room.

Please compete	e all fields.					
Date of Meetin	g					
Name of Meetin	ng					
Meeting Start Time		Approximate # of Attendees				
Meeting End Tir	me					
Contact Name:		Contact Phone Number:				
Contact Email:		Contact Phone Number.				
	_	_		_		
	Re-	Occurring	Meeting In	<u>formation</u>		
None						
Daily	Every	day(s)	Every weekday			
Weekly	Recur every	week(s) on:				
	Monday	Tuesday	Wednesday	Thursday	Friday	
Monthly	Day	of every	mon	th(s)		
	The			of every	month(s)	
Notes:						

- Please have the presenting laptop in the meeting room 30 minutes prior to the meeting start time to allow for set up if in a Potomac Room.
- Please let the TCF staff know about any cancellations. If meeting participant(s) have not arrive within 5
  minutes after the meeting start time, the room reservation will be considered forfeited and will then be
  available to others.
- Re-occurring meetings will only be scheduled in 6 month increments.
- Please contact the front desk at 443.835.0176 if any tables with plugs/outlets need to be moved or if the partition walls need to be moved
- DO NOT CHANGE ANY SETTINGS ON THE iPads or monitors