



**OLC EDUCATION & CONFERENCE CENTER**

9400 West Higgins Rd., Suite 100  
Rosemont, IL 60018-4975  
847.384.4210  
OLCevents.com

**EVENT/MEETING SPACE REQUEST FORM**

Dates Requested: \_\_\_\_\_  Site Visit - Please call to schedule

Organization: \_\_\_\_\_  
(please print)

Billing Address: \_\_\_\_\_  
\_\_\_\_\_

Organization Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ How did you hear about the OLC? \_\_\_\_\_

Set Up Date and Time: \_\_\_\_\_

Date(s) & Hours of Meeting: \_\_\_\_\_ Number of People: \_\_\_\_\_

Title of Event/Meeting: \_\_\_\_\_

**EVENT/MEETING SPACE REQUIRED:**

- Auditorium A - Classroom - 72pp (1964 sq ft)
- Auditorium B - Classroom - 72pp (1973 sq ft)
- Auditorium C - Classroom - 36pp (1102 sq ft)
- Auditorium AB - Classroom -144pp (3937 sq ft)
- Auditorium BC - Classroom - 108pp (3075 sq ft)
- Auditorium ABC Classroom - 180pp (5039 sq ft)
- Conference Room 1A - Hollow square – 16pp (493 sq ft)
- Conference Room 1B – Conference – 8pp (291 sq ft)
- Demo Station – For presenting Live Demonstrations to Auditorium(s), Conference Room(s) or Outside Venues

**EVENT/MEETING SPACE AV REQUIREMENTS** *(additional fees are charged for these)*

- Session(s) Recorded
- LCD Projector (additional to one provided)
- Teleconferencing:  with Conference Phone
- Videoconferencing with:  Outbound Locations  Inbound Transmission
- Live Video Streaming
- Webcasting
- Panel Discussion Set-up - # on Panel: \_\_\_\_\_ # Mics: \_\_\_\_\_  Confidence Monitor
- Flipcharts  Easels *(Complimentary)*

**Please note:** AV technician(s) required for space requested will be included in quote.  
Additional fees are charged for HVAC if meeting is after business hours or on a weekend.



**EVENT/MEETING SPACE REQUEST FORM** *(Continued)*

**CATERING REQUIRED:**  YES  NO

*If catering is needed OLC staff will contact you with menu options and provide a separate estimate.*

**SPECIAL MEETING/EVENT REQUIREMENTS:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EVENT/MEETING MATERIALS REQUIRED BY OLC:**

Participant Registration list

Meeting/Event Daily Agenda

*I will be held responsible by the OLC Education and Conference Center for all requested information as specified above.*

Organization Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**If you have any questions or changes, please contact the OLC at 847-384-4210.**

**For Office Use Only**

<b>Date Received</b>	
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