



Level Two Event Space Use Request Form

1. **Organization Name ("User"):** _____
2. **Event Type (Description):** _____
Do you intend to serve alcohol? _____
If so, do you plan to use a third party to provide the alcohol? _____
If so, please provide name and address of third party, contact person, email and phone:

3. **Requested Date and Time:** _____
4. **Approximate Number of Guests:** _____
5. **User Contact (Relationship to User):** _____
6. **User Mailing Address:**

7. **User Phone:** _____ **User Email:** _____
8. **Preferred Time & Method of Contact:** _____

If this request is granted, User understands that User must execute and comply with the Level Two Event Space Use Agreement and Level Two Event Space Rules and Policies of Use.

Signature: _____ **Date:** _____

Return to Level Two at: Level Two Inc, 2498 Perry Crossing Way, Suite 240, Plainfield, IN 46168, or at Info@LevelTwoCoworking.com, with the \$100 Security Deposit.

Vision: Our vision is to nurture business development, motivate and encourage entrepreneurs and create a stronghold for economic growth.

Mission: Our mission is to create an environment that spurs progress through a collaborative culture, educational opportunities and community support.