**XAVIER UNIVERSITY**

**HAGGERTY HOUSE YOUTH CENTER**

**Reservation Form**

No. \_\_\_\_\_\_\_\_\_\_

Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] Student Organization [ ] University Office/Unit [ ] Outside Group [ ] Others (specify) \_\_\_\_\_\_\_\_\_\_\_\_

Date of Application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time of Application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Use: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time of Use: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expected Number of Attendees: \_\_\_\_\_\_\_\_\_\_\_\_\_

Area to be Used (please check) [ ] Chapel Area [ ] Prayer Session Room [ ] Dining Area [ ] Library Area

[ ] Study Area/Dorm A [ ] Music-Recreation Area/Dorm B

For overnight users only [ ] non-aircon [ ] with aircon

Note: Haggerty House only provides mattresses for group overnight sessions. Participants would have to

bring their own pillows, towels and blankets. Please bring your own laptop and LCD projector.

Maximum number of participants is 20 for overnight use.

Hourly Rate: PhP 50.00 x \_\_\_ hour/s = PhP \_\_\_\_\_\_\_\_\_\_

Daily Rates: Non-aircon: PhP 250.00 (half day)

Php 500.00 (whole day) x \_\_\_ day/s = PhP \_\_\_\_\_\_\_\_\_\_

With aircon: PhP 500.00 (half day)

Php 1,000.00 (whole day) x \_\_\_ day/s = PhP \_\_\_\_\_\_\_\_\_\_

Overnight Rates: Non-aircon: PhP 750.00/day x \_\_\_ day/s = PhP \_\_\_\_\_\_\_\_\_\_

With aircon: Php 1,500.00/day x \_\_\_ day/s = PhP \_\_\_\_\_\_\_\_\_\_

Please pay at the Finance Office through Fund Transfer [Loyola House-Haggerty House with Account No: 5101-9280]. Kindly present official receipt as proof of payment at Campus Ministries Office.

Reserved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Endorsed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature above Printed Name Signature above Printed Name

(Designation)

Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Campus Ministries Office Use Only**

Area to be Used (please check) [ ] Chapel Area [ ] Prayer Session Room [ ] Dining Area [ ] Library Area

[ ] Study Area/Dorm A [ ] Music-Recreation Area/Dorm B

Student Assistant on Duty: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_ Official Receipt Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved by: FR RICHARD V ELLA SJ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Director

Remarks: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_