RESTON COMMUNITY CENTER RENTAL REQUEST FORM

Valid For Rental Dates September 1, 2023 – August 31, 2024

PRIMARY CONTACT AND/OR ORGANIZATION:										
Event is Being Sponsored by: INDIVIDUAL BUSINESS/ORGANIZATION Today's Date:										
Contact Name* First	Last									
Company/Organization (If Applicable)	1									
Address**										
City		St	ate		Zip					
Phone		'								
Email Address										
IS YOUR ORGANIZATION A REGISTERED 501(C)(3)?										
IS YOUR ORGANIZATION AN EDUCATIONAL INSTITUTION? YES		0								
IS YOUR ORGANIZATION A CHURCH?		0								
*Contact person must be the responsible party for the event and must be present on the day of the rental. **FOR EVENTS SPONSORED BY INDIVIDUALS: Please provide your home address in the space above. If you do not reside in Reston, but work in Reston, please provide your business address below to receive Reston rates (proof of business address is required and must be submitted with request). Business Address:										
business Address.										
EVENT DETAILS:										
Failure to disclose all event information may result in cancellation of your rental. Incomplete information will delay the processing of your application and may result in loss of your requested dates/times. Please check "Yes" or "No" for each of the following. If you mark "Yes" for any item, please provide details below or on an attached sheet.										
Is your event open to the public?				YES	□ NO					
Will you be advertising your event?				YES	□ NO					
Will you collect admissions, donations or fees?				YES	□ NO					
Is your event a fundraiser? (If "Yes," please provide details on an attached Fundraising is only permitted at events sponsored by nonprofit organizations.	sheet.)			YES	□ NO					
Will food or beverages be served?				YES	□ NO					
Will alcohol be served? (ABC license required.)				YES	□ NO					
Will your event need access to our Audio System? (No external speakers (Permitted in the CenterStage, Community Room and Jo Ann Rose Gallery only.				YES	□ NO					
Will your event feature live music and/or performers? (Restrictions apply, will require pre-event meeting and additional fees for techn	ical support.)		YES	□ NO					
Are you hiring a third-party vendor? (DJ, caterer, entertainer, etc.)				YES	□ N0					
Are you requesting a fee waiver? (If "Yes," attach letter detailing request.)				YES	□ N0					
Will your event use the pool?			YES	□ NO						
Additional Information:										

PLEASE COMPLETE BOTH SIDES AND RETURN TO RCC



Reston Community Center Lake Anne 1609-A Washington Plaza • Reston, VA 20190



Reston Community Center Hunters Woods

2310 Colts Neck Road • Reston, VA 20191

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FACILITIES REQUESTED												
CHECK ALL RENTAL REQUESTS		Meeting Ro	om Type	Max. Capacity Tables and Chairs	Max. Capacity Chairs Only	Reston Hourly Rental Rate*	Non-Reston Hourly Rental Rate*					
RCC HUNTERS WOODS												
	Small Meeting Room			20	23	\$14.00	\$42.00					
	Medium Meeting Room				49	\$22.00	\$66.00					
	Intermediate Meeting Room				72	\$30.00	\$90.00					
	Large Meeting Room				97	\$38.00	\$114.00					
	Community Room Floor				260	\$70.00	\$210.00					
	Kitchen				5	\$16.00	\$48.00					
	the CenterStage and Dressing Room				260/30	\$90.00	\$270.00					
TERRY L. SMITH AQUATICS CENTER												
	Single Lap Lar	ne				\$17.00	\$51.00					
	Entire Pool – L	ap Pool (additional staffing		148	\$105.00	\$315.00						
	Entire Pool – Warm Water Pool				65	\$75.00	\$225.00					
	Entire Natatorium – Both Pools				229	\$180.00	\$540.00					
RCC LAKE ANNE												
	Jo Ann Rose Gallery (Includes Kitchen)				110	\$50.00	\$150.00					
	Additional E	Equipment Requeste	d (Additional rental fees apply and	are outlined in F	Rental Policies ar	nd Procedures doc	cument)					
□Piano □LCD Projector □Portable Stage (Community Room Only)												
			*Excludes damage security	deposit								
			EVENT INFORMAT	TION:								
□ BABY SH	BABY SHOWER BIRTHDAY PARTY FAMILY/SOCIAL GATHERING BUSINESS/ORGANIZATION MEETING											
☐ WEDDING	□ WEDDING RECEPTION □ RECITAL □ OTHER:											
Event Name												
Requested Date: Start Time: End Time: (INCLUDE SETUP & CLEANUP TIME)												
Alternate Date/Time: (IF ANY)												
Anticipated Attendance: (PLEASE INCLUDE CHILDREN. ACTUAL ATTENDANCE MAY NOT EXCEED ROOM CAPACITIES.)												
For multiple dates (on-going rentals), please attach a separate sheet listing all dates and times.												
STATEMENT OF CERTIFICATION:												
I certify that I have reviewed RCC's Rental Policies and Procedures and that the information provided on this form is true and accurate to the best of my knowledge. I understand that providing false or misleading information is grounds for RCC to cancel or terminate my event reservation.												
Signature	Signature:Date:											

Fairfax County's programs, services and facilities are available to all citizens regardless of race, color, national origin, sex, age or disability. Requests for special accommodations must be received at least seven working days in advance. For additional information regarding reasonable accommodations and support provided to facilitate participation for individuals with disabilities, call 703-476-4500 or TTY 711.

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1609-A Washington Plaza • Reston, VA 20190

703-476-4500, TTY 711 • 703-476-2488 (FAX) • RCCFacility@fairfaxcounty.gov

