

Guest Meeting Worksheet

Use this worksheet to plan your confirmed meeting at the McKnight Foundation.

Complete this form in Adobe Reader or Acrobat (not web browser) to save your responses.
For more information on meeting rooms and logistics, visit our [meeting space information page](#).

GENERAL INFORMATION

Attach a copy of your agenda

Group name: _____

Posting name of meeting (for signs): _____

Meeting room:

- | | | |
|---|---|--|
| <input type="checkbox"/> 6th Floor Small Room | <input type="checkbox"/> 6th Floor Large Room | <input type="checkbox"/> Entire 6th Floor Room |
| <input type="checkbox"/> Board Room | <input type="checkbox"/> Conference Room | <input type="checkbox"/> Library |
| <input type="checkbox"/> Fourth Floor | <input type="checkbox"/> The Falls | <input type="checkbox"/> Wheat |
| <input type="checkbox"/> Wood | <input type="checkbox"/> I would also like to discuss breakout space. | |

Program day and date: _____

Meeting start time: _____ Meeting end time: _____
(Provide the start and end times you provide attendees. We will book the room to allow for set-up and clean-up time.)

Meal & break times (or attach an agenda): _____

Number of participants (include coordinators, presenters, & attendees): _____

Brief description of your meeting:

CONTACT INFORMATION:

Coordinator/Planner: _____ Coordinator's Arrival time: _____

Phone: _____ Email: _____

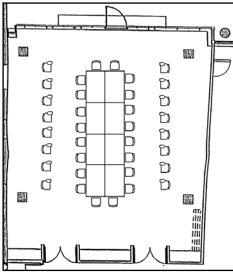
Facilitator/Presenter: _____ Facilitator's Arrival time: _____

Phone: _____ Email: _____

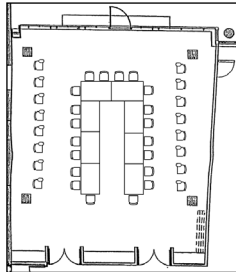
ROOM CONFIGURATION

The following configurations apply to the Board Room only.

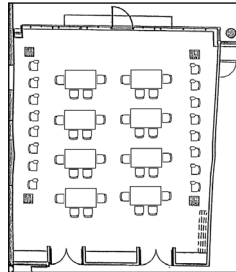
Default



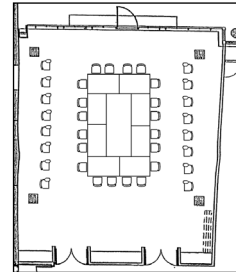
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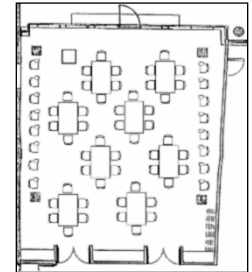
Classroom



Box



Staggered



I require another configuration (please discuss this with your McKnight contact)

AUDIOVISUAL

McKnight can provide the A/V and technology equipment listed below at no charge. Check the items you need. For an A/V list and other room information, visit our [meeting space information page](#).

Easel and flip chart, number required (up to 4): _____

Video display (TV/LCD projector depending on the room)

Presentation remote with laser pointer

Wifi access

Speakerphone

Other (please discuss this with your McKnight contact): _____

**Available in the Board Room only*

Lectern with microphone*

Wireless handheld mic*

Wireless lavalier (clip-on mic)*

DVD/CD player

Videoconferencing

FOOD AND BEVERAGE

McKnight can provide the beverages listed below at no charge. Check our selections.

Regular coffee

Decaffeinated coffee

Assorted tea bags and hot water

Ice water in pitchers

Assorted sparkling water

Assorted canned soft drinks

CATERER INFORMATION

Provide the caterer name and delivery time below. Please use any caterer of your choice. For your convenience, you may also visit our [list of recommended caterers](#).

Name: _____

Delivery time: _____

ACCESSIBILITY AND OTHER NEEDS:

We strive to reduce barriers to participation in meetings held in our office. If any accommodations are needed, please let us know.

Social distancing configuration required.

Please complete the form, "save as," and email to dschlosser@mcknight.org.