MCKNIGHT FOUNDATION

Guest Meeting Worksheet

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

Complete this form in Adobe Acrobat or Reader to save your information

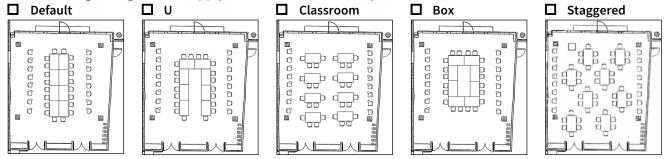
For more information on meeting rooms and logistics, visit our meeting space information page.

GENERAL INFORMATION						
Attach a copy of your agenda						
Group name:						
Posting name of meeting (for signs):						
Meeting room:						
□ 6th Floor Small Room	🗆 6th Floor Larg	ge Room	🗆 Entire 6th F	loor Room		
🗆 Board Room	□ Conference R		🗆 Library			
Fourth Floor	□ The Falls		□ Wheat			
□ Wood	🗆 I would also l	like to discuss breakout space.				
Program day and date:						
Maating start times		Menting and tim				
Meeting start time: (Provide the start and end times you		Meeting end tin		cot up and cloan		
up time.)	i provide attendees	. we will book the	room to allow for	set-up and clean-		
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.



□ 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 <u>meeting space information page</u> .					
 Easel and flip chart, number required (up to 4 Video display (TV/LCD projector depending or Presentation remote with laser pointer Wifi access Speakerphone Other (please discuss this with your McKnight *Available in the Board Room only 	the room) U Wireless handheld mic* Wireless lavaliere (clip-on mic)* DVD/CD player Hybrid Meeting				
FOOD AND BEVERAGE					
McKnight can provide the beverages listed below at no charge. Check our selections.					
🗆 Regular coffee	Ice water in pitchers				
Decaffeinated coffee	□ Assorted sparkling water				
Assorted tea bags and hot 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 <u>list of recommended caterers</u> .					
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 <u>dschlosser@mcknight.org</u>.