

Mallard Stables, LLC
P.O. Box 940
Decatur, AL 35602
(256) 353-2388 or (256) 318-1120

## **Facility Rental Information Request for Wedding**

esponsible Party (Applicant)	
Name of Responsible party (applic	ant)
Address:	
City, State, Zip	
Contact Phone #:	
Email address:	
Date requested:	Sunday Monday Tuesday Wednesday Thursday Friday Saturday
vent or Party Information:	
Facility Rental Purpose:	Church Event Field Trip Non-profit event
	High School Event Middle School Event Reception
	Wedding Rehersal Dinner Birthday Party/Age:
If wedding:	Bride:
	Groom:
Primary Age of Attendees:	< 12 12-18 19-25 >25
Total Number of Guest expected:	(Most suitable for party size less than 200)
How many Hosts Families are involved:	(Please note: For liability to be shared with other host families, signed contracts must be obtained by each)
Will a band or DJ be hired for event?	Yes No
Beginning and Ending time of party?	
otes or Special Needs:	
Note: This information request by no means si No contract shall be implied or assumed	ignifies that parties have agreed to, or contracted for Rental of Mallard Stables, LLC. by either party until Rental Contract is signed by both parties.
gnature (applicant):	Date:
g. a.a.o (approant).	