Student Union & University Center Reservation Request For Aug. 12, 2019 - Aug. 8, 2020

Print completed form and return to SU 114 February 4th - 8th. Office hours are 8:30-4:00PM.

Reservations will be confirmed via e-mail by February 20th.

Forms may not be turned in prior to February 4th

Event Date:		Start Time:	End Time:
* If start time or end time are outside building hours, a fee will be charged. Do not add set up time to your reservation, this time is built in automatically			
Organization/ Ev	vent Name:		# of People Attending:
Brief Description of Event:	1		
Organization Co	ntact Name:	Organization Contact Phone:	
Organization Contact E-mail:		Student Organization Advisor:	
Catering:			
Requested Room Style: Did you have this event last year?: Yes			his event last year?: 🗌 Yes 🔲 No
		If yes what wa	s the date of the event?:
Tention Control			Garage Div.
Banquet		Boardroom	Classroom
Constitute of the constitute o			
Open Confer	ence	Theater	U-Shaped Conference
☐ I will have this event video recorded ☐ I will have this event audio recorded ☐ Dance Floor			
☐ Bistro Tables ☐ Podium with Computer and Projector ☐ Stage ☐ Special Lighting			
☐ Table Mic	☐ Conference Phone	☐ Streaming/Webcam ☐	Wireless Hand Held Mics
If you have a regularly reoccuring meeting you can complete this one cover sheet and attach a list of dates to this form.			