STUDENT ORGANIZATION ROOM/FACILITY RESERVATION FORM

Reservations cannot be guaranteed without adequate notice. Please allow at least two weeks.

Name of Organization ___________________________________________________________

Person Making Reservation _______________________________________________________

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone #</th>
<th>Email</th>
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Name of Organization Advisor ____________________________________________________

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<tr>
<th>Name</th>
<th>Phone #</th>
<th>Email</th>
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Type of Activity: __________________________________________________________________

Date(s) of meeting: ____________________________ Circle One: One-time / Standing Meeting

Room Requested: 1st __________________________

Start Time: ____________

Include adequate time for setup you may do 2nd __________________________

End Time: ____________

3rd __________________________

Number Expected ____________ Will food and drink be served? ______________

Additional Set-up Needs:
Please check all that apply and state the number of each item needed. Please provide diagrams if necessary.

☐ Round tables ________ ☐ Podium ____________

☐ 6’ long tables ________ ☐ Projector ____________

☐ Chairs ________________ ☐ Screen ______________

☐ Sound system __________ ☐ TV/DVD Player ________

Your reservation is confirmed upon your receipt of a Building Order through email or organization mailbox in the Office of Student Life. If you find it necessary to change the date or cancel your activity, please contact the Office of Student Life at once. Reservations cannot be guaranteed when less than one week’s notice is given.

For Office Use Only

Request Approved ____________________________ Date ____________

Student Activities Coordinator or Dean of Students

All requests must be approved before processing.

Call reservation:
Confirmation received:
Organization contacted with confirmation: