

Facility Use and Event Request Form

FOR OFFICE USE ONLY
Date submitted: _____
Initials: _____
Reservation # _____

This form must be completed for all events in which Student Center facilities are to be used. Requests for facility use should be filed in the Office of Student Activities **two weeks** preceding the event. **Completion of this form does not guarantee use of the requested space; a member of the Student Activities staff will contact you if there is a space conflict or your event is not approved.**

Name of event: _____ Room/space requested: _____
Date of event: _____ Expected attendance: _____
Actual starting time: _____ Expected ending time: _____
Set-up time: _____ Tear-down time: _____
Please provide a brief description of the event: _____

If setup is complex, draw a diagram on the back of this form.

Please check what you will need for your event:

Chairs, tables, podium, staging, etc.: _____

Sound, lighting, audiovisual equipment, etc.: _____

Event is during normal office hours; need Media Services staff to set up and run equipment:
***Call Media Services at 320-589-6150 to arrange**

Event is during normal office hours; will pick up, set up, and run equipment ourselves:
***Call Media Services at 320-589-6150 to arrange**

Event is during the evening or weekend; need Student Center Tech Crew to set up and run equipment

Catering: ***Call catering at Call 320-589-7016 to arrange**

Fire in Alumni Room

We accept responsibility for damage, security, and cleanup charges which may be incurred as a result of this event. Full Student Center policy can be found at <http://www.morris.umn.edu/services/stac/policiesandforms.html>.

Sponsoring group/office: _____ Individual responsible for event: _____

Email: _____ Phone: _____

Oyate

Alumni		University		Cougar	
Firenplace					

All Other Rooms

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<input type="checkbox"/> SC Custodian	<input type="checkbox"/> Event entered on computer schedule	
<input type="checkbox"/> Plant Services	<input type="checkbox"/> Setup notes entered on computer schedule	
<input type="checkbox"/> Media Services	<input type="checkbox"/> Copies made	
<input type="checkbox"/> SC Tech Crew	<input type="checkbox"/> Copies sent	<input type="checkbox"/> Date filed
<input type="checkbox"/> Other:	<input type="checkbox"/> Original copy filed	<input type="checkbox"/> Initials