
Meeting / Special Event Information Sheet

Form Revision date: 09/16/07

- This is the first time this request has been submitted
 This is a revision to a previously submitted request
(If this is a revision – please CIRCLE the revised area)

Meeting / Event: _____ Location: _____

Date (Day): ____/____/____ (_____) Time arriving for setup: _____

Event START time: _____ AM / PM Event END time: _____ AM / PM

Include Announcement in:

- Bulletin (deadline Tuesday) Screen in Grace Hall Newsletter (deadline 20th of each month)

Announcement text: _____

Transportation furnished (info. for bulletin purposes only): Yes No

(If transportation will be furnished – you must complete a Vehicle Use Form)

Number of people expected to attend: _____ *(this is necessary to secure supplies)*

Kitchen Supplies needed: paper plates bowls dessert plates plastic silverware

8 oz. Styrofoam cups 12 oz. Styrofoam cups napkins

Other _____

Set-up required by Custodian: (i.e. tables/chairs)

(Please note: The custodian is only involved in set-up and clean up on certain events. If the custodian is not involved in set-up, it is the responsibility of the person in charge of set-up to return furniture, fixtures and/or equipment to its original place; to follow the posted procedures in the kitchens, if the kitchen area is used; and to ensure that all doors are locked when the event is over.)

Who will be locking and unlocking doors? _____

Audio/Visual Equipment or Supplies Needed: _____

Office Assistance Required _____

In the event of a schedule conflict or other information is needed, list a contact person:

Contact Person/Responsible Party: _____ Phone: _____

Date of Request: ____/____/____ **Office Staff who Received Request:** _____

All requests must be made at least 2 weeks in advance.