

# Calendar Event & Room Reservation Form

(internal form)

Event Date(s) \_\_\_\_\_

Group Meeting/ Event Name \_\_\_\_\_

Start Time \_\_\_\_\_ End Time \_\_\_\_\_ # People \_\_\_\_\_

Setup Time \_\_\_\_\_ Teardown Time \_\_\_\_\_ Registration? YES NO

Room(s) requested \_\_\_\_\_

*Similar sized room(s) may be substituted based on activity, event size, and other events.*

Contact Person \_\_\_\_\_ Contact Phone \_\_\_\_\_

Contact Email \_\_\_\_\_ Staff Liason \_\_\_\_\_

Event Description:

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Items needed for your event

- |   |  |                                      |
|---|--|--------------------------------------|
| <input type="checkbox"/> Podium             | <input type="checkbox"/> Chairs ____                           | <input type="checkbox"/> White Board |
| <input type="checkbox"/> Microphone         | <input type="checkbox"/> Aisle? Y N                            | <input type="checkbox"/> Easel       |
| <input type="checkbox"/> Square Tables ____ | <input type="checkbox"/> Coffee Cart: must<br>prepare/clean up | <input type="checkbox"/> Piano       |
| <input type="checkbox"/> Round Tables ____  |  | <input type="checkbox"/> Other       |

Other:

Added to Calendar (date) \_\_\_\_\_ (initial) \_\_\_\_\_