

UWGB Campus Location: \_\_\_\_\_

Organization / Department Requesting : \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email : \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Are you Non Profit? \_\_\_\_\_

Date of Event: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Event Name: \_\_\_\_\_

Number of People: \_\_\_\_\_ Building /Area: \_\_\_\_\_

Room: \_\_\_\_\_ Room Set Up: \_\_\_\_\_

Will there be a fee charged for this Event? \_\_\_\_\_ If Yes, Fee Amount: \$ \_\_\_\_\_

Will you need IT Support? \_\_\_\_\_ If Yes, Additional Fees may be applied

Will Food be Served? \_\_\_\_\_ If Yes, All food must be arranged by an outside vendor

*Please clean up after your event, Additional Cleaning Fee's may be applied*

Will Alcoholic Beverages be Served? \_\_\_\_\_

*If Yes, Pursuant to UWS 18.03913, the use or possession of alcoholic beverages is prohibited on all university premises, except as permitted by the Campus Administration Officer, subject to statutory age restrictions. Please see Facilities Use Policies & Procedures for more information.*

On behalf of the organization I represent, I assume responsibility for the use of the facility in accordance with the attached UW-Green Bay, Facility Responsibility, Release, and Authorization Use Policies and Proce-

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- \* **Please Read and Sign Back Page for Reservation Consideration**
- \* **All Approved Facilities Use Requests Require a Certificate of Insurance and W-9**
- \* **All Facilities Use Requests must be authorized by the Campus Executive Officer**

**Please complete and return this form**

