Date of Request		

Shepherd Union

Event Request Form

	This is NOT a confirmation	on! A room will NOT b	e reserved	until a sig	ned form is	s returned t	to SEC Office.		
	Name of Event:			Sponsoring Group:			Cost Code:		
EVENT INFO									
	Beginning Date & Time of Event:		Person Reserving:		Phone:				
	Ending Date & Time of Event:								
	Beginning Room Access Time:		Contact Person at Event:		Phone:				
	Ending Room Access Time:		1						
	Areas Scheduled:			Max Room/Event Capacity:					
	Type of Event	☐ Meeting ☐ Bang		et			☐ Dance		
	(mark all that apply):	Other (please specific		TELL TOTALISE					
	Catering Services	☐ WSU Dining	l_	\$100*	☐ Food \	Waiver**	☐ Benefit		
	** Requires authorization from Dining Services **Must be attached to this form.								
						maet se attac			
		equiring tickets, addition							
		submitted <u>TWO WEEK</u> Irn in form by above dat		•		,			
		-	e will lesuit	III CANCE	LLATION	JE EVENT.			
ΙFΟ	With WSU Student ID	\$		1			Φ.		
Z		nout WSU Student ID \$		Other (discount for canned food, costume, etc.) \$ Other Tickets:					
ADMISSION INFO	Ticket Sales Begin Date:			(special tickets must be provided in advance. All tickets must be numbered)					
	Ticket Sales End Date & Time:								
¥	Type of Ticket (wristband, ticket, other) **Day of Event Only Ticket Sales: Ticket sales time start: Ticket sales time finish:								
		complimentary tickets wi							
	Funds will be WSU Police (1st-\$35, after that	deposited in the Busine at \$25/hr) \$ 35/25hr		afe. Reimb nours =	ursement w \$	/ill be made	per WSU policy		
	WSU Ushers	\$ 10/hr	x		\$	These rates are used to prepare your event. You will be billed for total hours required based on your start and end time.			
FO	Building Manager After Hours	\$ 10/111 \$ 35/hr	x i		 				
ERVICE INFO	Desk Attendant After Hours	\$ 35/11 \$ 25/hr	1	nours =	\$				
SVIC		¥ ==/			\$				
SER	Building After Hours	\$ 50/hr	-	nours =	\$				
	Excessive Cleanup	\$ 50/hr		nours =	\$				
	Other (electrical, damage, etc)	\$ 35/hr	x r	nours =	\$				
	By cianing this form	ou are acknowledging t	hat you hav	o complete	d this form	accurately	and completely		
	and agree to abide by WSU a	and Shepherd Union Pol	licies and P	rocedures.	Advisor mu	ust have aut	horization for the listed		
∠	cost code - signing this form allows event-associa		_						
3ILI	Person Responsible for Event - PRINT:		Advisor Responsible for Event - PRINT:						
RESPONSIBILITY	Develop Descensible for Event CIONATUDE.		Advisor Responsible for Event - SIGNATURE:						
	Person Responsible for Event - SIGNATURE:								
RE	Decree Proposition for French DUONE.		Advisor Responsible for Event - PHONE:						
	Person Responsible for Event - PHONE:								
White	Yellow Copy - Business Office								

Goldenrod Copy - Sponsoring Group