

Event Set-Up Request

Today's Date: _____

Contact Person for Event: _____ Phone/Email: _____

Time/Date of Event: _____

Room/Location for Set Up: _____

Expected Group Size: _____

Needs Set Up By (date): _____

Will there be a speaker? ☐ Yes ☐ No

Tables: ☐ Long, How many?: _____ ☐ Round, How many?: _____

Will there be Food? ☐ Yes ☐ No

Do you need Chairs? ☐ Yes; How Many?: _____ ☐ No

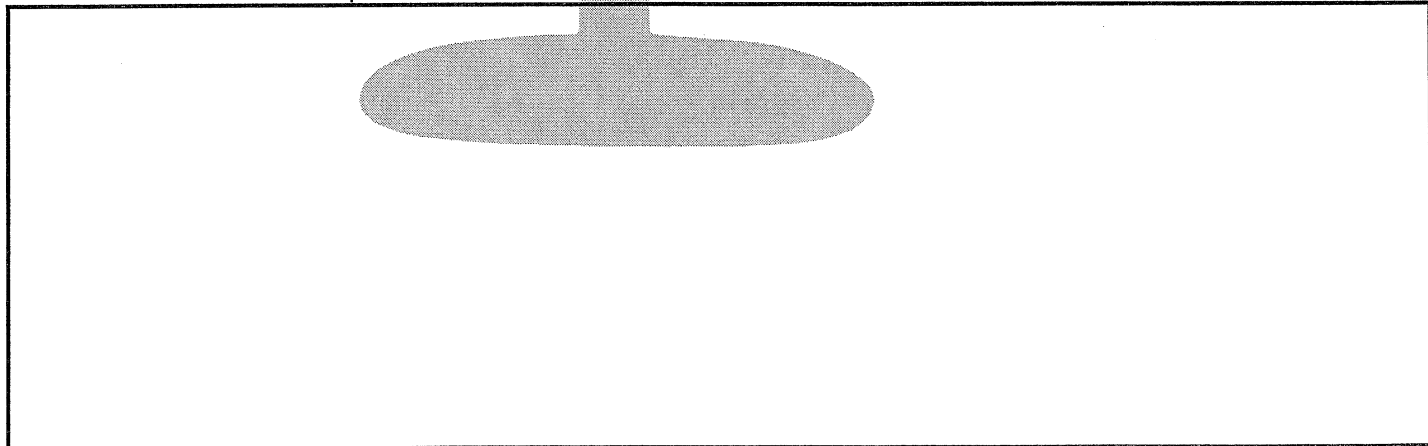
Are you expecting people to be ☐ Standing or ☐ Sitting?

What else do you need? ☐ Kitchen (Full use) ☐ Kitchen (Prep only) ☐ Owl Pro

☐ Zoom Room ☐ AV person ☐ Custodian

Do you have a floor layout idea in mind? Turn this page over and draw your idea on the back

Additional Notes for Set-Up:



Please place in the Director of Administration's Mailbox once completed