

****This form must be completed at least two weeks prior to the date of the requested event.**

Ellis Hall Reservation Form

For Non-University Functions

Event Information

Department/Organization _____ Phone _____

Room Requested _____

Date(s) Requested _____

Time(s) Requested _____

Starting Time _____ AM/PM Ending Time _____ AM/PM

Name of Requestor _____

Phone # _____ E-mail _____

Second Contact Person _____

Phone # _____ E-mail _____

****After you have read each policy statement, initial indicating that you understand and comply with each:**

___ One of the two contact persons named on this form will assume responsibility for this space during the **entire** time reserved.

___ I will notify the Music Office (836-5648) if our event is cancelled.

___ I will notify the Music Office (836-5648) no later than **two** business days in advance regarding any change to the scheduled times.

*Please note that time changes of this nature may not be possible because of other scheduled events.

___ The room must be left in the same condition as it was when we arrived. If not, our organization/department may incur charges. My group assumes responsibility for all equipment in the room during the time we have the space scheduled. I understand that we may be charged for the repair or replacement of damaged or stolen equipment.

By signing this form, I acknowledge the following requirements for use of academic space and agree to them:

Signature _____ Date _____

Printed Name _____

*Parking: Consider what kind of parking arrangement (if any) will be needed and make appropriate arrangements.