

**KANSAS WESLEYAN UNIVERSITY
FACILITY RESERVATION FORM**

Complete Form and Submit to the Dean's Office at rita.northup@kwu.edu

(Incomplete forms will be returned.)

Today's Date: ____/____/____ Category: Campus Event Outside Event
Name of Event: _____
Contact Person **ON CAMPUS DURING EVENT**: _____
Contact Person's Phone: (____) ____ - ____ Ext. # _____
Address: _____ KWU Campus Box#: _____ Email: _____

*** Do not advertise your event until an APPROVED copy of this form is returned to you. *
You do not have the reservation until you have received a confirmed copy.**

Facilities Requested: Stanton Conference Rm Coyote Conference Rm Sams Chapel Miller Chapel
 Fitzpatrick Auditorium Fine Arts Rm # ____ Shriwise Cafeteria Stewart Dining Rm Memorial Library
 Pioneer Hall Rm # ____ Peters Science Hall Rm # ____ Student Activities Center Rm # ____
 Hauptli Student Center Brown Mezzanine Backstrom Conference Room (*prior approval required*)
 Other

Date of Event: ____/____/____ Additional Dates if Applicable: _____
Additional Dates if Applicable: _____

Day of Week: _____
Times: ____:____ am pm to ____:____ am pm

Estimated Attendance: _____ Set Up Date: _____ Time: ____:____ am pm

Audio Visual Request (Circle all that apply): Public Address System TV/VCR Slide Projector
 Overhead Projector Portable Screen CD/Tape Player LCD Projector
 Easel/Flip Chart Podium Other: _____

Food Service Request
Please contact Chartwells Dining Service directly for more information and to make arrangements:
Call: (785) 825-5165 E- Mail: Jan.Ganzenmuller@compass-usa.com

Residence Hall Room Request
Please call the Student Life Office at (785) 827-5541 ext. 1164 or heather.smith@kwu.edu for more information.

Athletic Facilities Request:
Please contact the Director of Athletic Programs (785) 827-5541 ext. 3194 or mjw@kwu.edu for more information

Physical Set-Up Request: List below the equipment that will be needed-attach a drawing or design if necessary.
For special set-up, contact the Maintenance Dept. (x 1110 or x 1112). Emergency Maintenance: 785.452.5240
 8 ft table _____ How many? Extra Trash Receptacles _____ How many?
 4 ft table _____ How many? Media Equip (Describe) _____
 chair(s) _____ How many? Other: _____
 AC Heat

Sponsor's Agreement: I agree that any damages or losses incurred during the use of University facilities will
FOR MORE INFORMATION CONTACT: Facilities Scheduling Officer, Academic Dean's Office, KWU, 100 E. Claflin Ave.,
Salina, KS 67401-6196, (785.827.5541 ext. 1280) rita.northup@kwu.edu

Sponsor's Agreement: I agree that any damages or losses incurred during the use of University facilities will
become the direct liability of my department:

Name of Event Sponsor: _____ Date: ____/____/____

OFFICE USE ONLY APPROVED DENIED

REASON IF DENIED: _____ \$ **FACILITY CHARGE** (if applicable)
Scheduling Officer: _____ Date: ____/____/2008