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REQUEST TO SCHEDULE ACTIVITY, FACILITY, and SERVICE

INSTRUCTIONS: Complete and return to <u>roomreservations@asurams.edu</u>. If additional information is needed, call or visit the Events Scheduling Coordinator at Albany State University, 2400 Gillionville Road, Albany, GA 31707; Office C -110 in the Student Center; (229) 500-2885.

Name:		Date:	
Address:			
City, State, Zip;			
Phone Number:	Alternate Phone Number:	Alternate Phone Number:	
E-mail:			
Organization (sponsor):			
EVENT INFORMATION:			
Title of Event:			
Event Set-up Date:	Start Time:	End Time:	
Event Date(s):	Start Time:	End Time:	
Event Clear Out Date:	Start Time:	End Time:	
Estimated Attendance:	Participant Fee:		
Will Minors Participate/Attend?			
	☐ Multi-purpose Rooms ☐ Arena ☐ tot ☐ Lobby ☐ Computer Lab ☐ Le	☐ Theater/Auditorium ☐ Free Speech Zone cture Hall ☐ Conference Room	
List any additional types of space or room.	s needed:		
Furniture (set un Nooded (Attach drawing / diagra	um of room setup):		
rumure(set-up)Needed: (Anach arawing/alagra			
Technology Services Needed: ☐ Projector/Scr	reen Podium Handheld Micro T support on-hand entire event I	T support for start of event only	
Technology Services Needed: ☐ Projector/Scr☐ Standing Microphone ☐ I	T support on-hand entire event \square I	T support for start of event only	

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