

Norfolk State University Office of Conference Services 700 Park Avenue, Suite 350 Norfolk, Virginia 23504 Office Phone (757) 823-8085

NON-CAMPUS ORGANIZATION RESERVATION REQUEST FORM

Complete and return with your \$25 non-refundable application fee at least thirty (30) days prior to proposed activity

CONTACT INFORMATI	ON					
		Contact Number				
Address				7 ' .		
City Email Address			State			
			_ FIN# □ SS# □			
EVENT INFORMATION						
Organization Name						
Event Name						
Facility Requested			Estimated Attendan	ce		
Date(s) Requested			_			
Event Set Up Time			Break Down Time			
Event Start Time			Event End Time			
Ticket Amount	\$		Open to Public	ΥΥ	N	
Vendors to participate	Υ	N	Note: Prior approval is require	ed for any proposed mei	rhandise sales on	
TYPE OF EVENT		TEC	HNOLOGY EQUIPMENT	REQUIRED		
Class			None			
Dinner/Dance/Pa	nrt.		Lectern			
Seminar/Lecture	-		Computer			
Vendor Table		 	Screen			
Athletic Event		-	LCD Projector			
Other			LCD FIOIECTO			
Other						
			Microphone			

ROOM PREFERENCE	PREFERRED ROOM SIZE			
Classroom	Less than 15 peop	le		
Computer Lab	16-30 people			
Meeting Room	31-50 people			
Information Table	51-100 people			
Gymnasium/Stadium	101+ people			
Theater				
Other Athletic Facility				
SET UP PREFERENCE				
As Is - Room has fixed seating which cannot	ot be moved from original o	onfiguration		
Banquet Style - Round tables set with a m		.0) chairs at each	1	
Classroom Style - Tables with chairs facing	g front			
Conference Style - Six foot rectangle table	es set up in square or U-shap	oe		
Lecture Style - Chairs set up in row seating	g with center aisle and head	l table		
Theater Style - Chairs only facing front				
OTHER NEEDS				
Catering				
Guest Parking				
Network Access				
Box Office/Ticket Sales				
I have read and will abide by Norfolk State University	's Policies and Procedures for	Facility Use. All a	ctivities m	ust be
approved by university officials before any actiity car	_	n event is prohibit	ted before	the event
is confirmed. No event is confirmed until the required	d deposit has been received.			
Signature of Responsible Person			Date	
UNIVERSITY USE ONLY				
UNIVERSITY OFFICIALS				
Davida Williams		Date		
Director, Auxiliary Services		Approved	Υ	N
Director, Advinary Services		Approved	•	14
Gerald E. Hunter		Date		
Vice President for Finance and Administration		Approved	Υ	N
F. Dan Young		Date		
Director, Facilities Management		Approved	Υ	N