THE POINTE **Reservation Request Form**





| | | | - | | | | | | | | | | | | | | | | |
|---|--------------------|------------------|---------|-------------|--------------------------------|--|---|---|--|--------|--------------|---|-------------|--------------|--------------|-------|----|--|--|
| Basic Event Information | | | | | | | | | | | | | | EM | S#: | | | | |
| Requested Event Date(s): | | | Durir | | | | | | | ng Wee | kend? | | During Holi | day? | | | | | |
| Event Name: | | | | | | | | | | | | | | | | | | | |
| Depa | rtment | t/Orga | aniza | tion: | | | | | | | | | | | | | | | |
| Reserved Time* Start: | | | | | End: | | * Time needed to access and vacate the facility, including catering | | | | | | | | | | | | |
| Event Time* Start | | | Start: | .: | | End: | | * Time your event will actually start and end | | | | | | | | | | | |
| Number of Participants*: | | | | | # of N | Vinors, if any: | * Numbers must not exceed max capacity numbers | | | | | | | | | | | | |
| Description of Event: | | | | | | | | | | | | | | | | | | | |
| (Write a short description of your event/purpose/organization) | | | | | | | | | | | | | | | | | | | |
| event/ | buipose/c | Jiganiza | ition) | | | | | | | | | | | | | | | | |
| Roon | n & Eve | ent Sp | becifi | cations | 5 | | | | | | | | | | | | | | |
| Requested Room(s): | | | Pacific | c Sun: | set: Summit: | | Summit: | Se | | Sot | t Llp Type: | | | | | | | | |
| (Check all that apply) G | | | Galler | Gallery: | | | | | | Set | Set Up Type: | | | | | | | | |
| Audio | o / Visı | ual | | | | Ame | nities | | | | | Park | ing | | | | | | |
| | Wireless | ess/Lapel Mics Q | | | Stag | | | age Rental (\$50) | | | | | Guests | s will pay & | & park via k | iosks | | | |
| | Hardwin | dwired Mics Qt | | | : | | Easel I | Rental (\$5ea) | | | | | 1-day | permit (\$1 | .5 each)* | Qty: | | | |
| | Projector / Screen | | | | | | Mobil | oard (\$20ea) | | | | | n directior | nal signs | Qty: | | | | |
| | PPT Clicker | | | | Dance Floor Rental - | | | | 21'x21' (\$250) | | | (\$60 e | ach) | | ۵ | | | | |
| Partition Pacific Sunset Room? | | | | | Linens are not provided by the | | | | | | | * Plus \$30 Parking Processing Fee (flat-rate) | | | | | | | |
| *We do not have teleconferencing equipment | | | | | | t * Pinning/taping material on walls is not permitted. | | | | | ted. | * Campus Depts: Ask your Dept about kiosk codes | | | | | | | |
| Catering | | | | | | | | | | | | Insurance | | | | | | | |
| Do you plan to use catering?*: | | | | | | | | aterer must be used for | | | | | | | | | | | |
| If yes, which one? | | | | | | | any event involving food and drink. | | | | | | | | | | | | |
| Please specify any vendors/special arrangments/decorations/accommodations you might bring or need for your event: | | | | | | | | | | | | | ent: | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| Primary Contact Information | | | | | n | | | | Day of Event Contact (if same as primary, leave blan | | | | | | | | :) | | |
| Contact Name: | | | | | | | | | Contact Name: | | | | | | | | | | |
| Primary Number: | | | | | | | | Mobile Number: | | | | | | | | | | | |
| Email Address: | | | | | | | | Email | Addres | s: | | | | | | | | | |
| Address *(if on-campus, skip an | | | | d input | dept. b | uildina/i | | Customer Type | | | | | | | | | | | |
| Street | | | | | | | , | | | | | | | | | | | | |
| City | - | | | | | | | | | | | | | | | | | | |
| | | | | *On-Campus: | | | | *If student org, must be scheduling certified | | | | | | | | | | | |
| | | | | | On-cumpus. | | | | | | | | | | | | | | |
| For O | Office U | Jse Or | nly | | | Note | S | | | | | | | | | | | | |
| Calen | dar | | | | | | | | | | | | | | | | | | |
| EMS N | Number | - | | | | | | | | | | | | | | | | | |
| MOU | /FUA Se | ent | | | | | | | | | | | | | | | | | |
| MOU | /FUA Rc | cvd | | | | | | | | | | | | | | | | | |
| Paym | ent | | | | | | | | | | | | | | | | | | |
| EMS T | ent. Boo | oked | | | | | | | | | | | | | | | | | |
| Layout Finalized | | | | | | | | | | | | | | | | | | | |
| Other | Service | 25 | | | | | | | | | | | | | | | | | |