

FACILITY RESERVATION REQUEST FORM

Texas Woman's University
 Conference Services
 P.O. Box 425379, Denton, TX 76204-5379
 Ph: 940-898-3644; Fax: 940-898-3556
conferenceservices@twu.edu

Requesting Person Name/Organization Name _____

E-mail Address _____

Phone _____ Alt. Phone or Fax _____

Address _____
 Street City, State Zip

Alternate Contact Person _____ E-mail _____

Phone _____ Alt. Phone _____

Address _____
 Street City, State Zip

Estimated Attendance _____ Large Event Form required+? Yes No

Name of caterer, if applicable _____ Use of Technology? Yes No

Description / Name of Event _____

Name of Facility and Room Number Requested _____

Date of Event	Time In	Time Out	Purpose	Additional Items Needed◆

Facility Rental & Misc. Charge(s) _____ Date Paid _____

I have read and understand the Operating Policies for Reservations, which are incorporated by reference herein, and agree to abide by their provisions.

 Requesting Person/ Date

 Conference Services / Date

 Advisor's Signature **if Applicable*** / Date

 Representative of Center for Student Development (Denton)
 or Student Life (Houston and Dallas) **if Applicable *** / Date

+ A large event is any event where alcohol is served and/or anticipated attendance is 100 or more and/or events where money will be exchanged.
 ◆ Please see reverse for additional services available.
 * Advisor's Signature and Representative from CSD or Student Life applicable only to student organizations.