

OHIO VALLEY UNIVERSITY

FACILITIES RESERVATION and SETUP FORM

NOTE: This form must be completed and submitted 6 weeks in advance of event.

NAME: _____/Phone _____ DATE SUBMITTED: _____

FACILITIES REQUESTED: _____

NAME OF EVENT _____

DATE/ TIME OF EVENT _____ No. Expected: Max/Min____/____

DATE AND TIME SET-UP NEEDS COMPLETED _____ (NOTE: If time is required to decorate or for Aladdin to set tables, please indicate time setup needs completed)

Please provide a rough sketch of the setup you require –indicate exact number of tables and chairs needed.

Note: Use the other side or a blank sheet if more space is needed to illustrate the room set up.

Campus Calendars open for this event _____ Facilities Form Rcvd. _____ Security Requested _____
Janitorial Support Requested _____ Sound System Requested _____ Library Media Equipment Requested _____

Please draw setup below: (Indicate number and kind of tables and chairs requested) 8' tables come in wide (36") and narrow (18") widths. Round tables are 5' diameter and seat 6-7 for meals.

Maintenance Initial: Area is available and in working order _____ (Initial)

HOUSEKEEPING - INITIAL EACH ITEM BELOW WHEN COMPLETED:

____ Area Clean ____ Bathrooms Stocked ____ Bathrooms Clean ____ Setup Completed

Revised 3/2014