

Please allow 7-10 business days for processing.
If you have questions, please call 989-774-PLAN or email plan@cmich.edu

General Information

1 st Contact: Email:	Name of Event:
2 nd Contact: Email:	1 st Date of Preference:
Company/Dept:	2 nd Date Preference:
Telephone:	Set-Up/Access Time:
Address:	Actual Start Time:
City & State:	Actual End Time:
Zip Code:	Estimated Attendance:
Account Number:	Event Description:

Location Preference

(Building & Room if applicable)

1stchoice

2ndchoice

3rdchoice

Classroom

Table Rows (Long Rows)

U-Shape

Theater (Just Chairs)

Set-Up Preference:

*Must be coordinated or approved prior to event.

Lecture Hall or Auditorium

Round Tables*

Open Space*

Custom*

Reservation:

New Event
 Add to Existing Event
 Ref. #:
 Reoccurring Event
 Copy of Previous Event
 Ref. #:

Will you be having food?:

Yes
 No
 Comments:

Audio Visual Needs:

Yes
 No
 If yes, please list:

CMU Affiliation:

CMU Faculty/Staff
 CMU Class/Course
 External
 Other:

Additional Information

Will you need on-campus parking/directional signage?

Yes No

Is this event open to the public?

Yes No

Will you need on-campus parking OR housing?

Parking Housing

Are you requiring a registration fee?

Yes No

Are you requiring an entrance fee?

Yes No

Are you fundraising during this event?

Yes No

Comments:

I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO READ MY BOOKING CONTRACT ONCE PROVIDED AND UNDERSTAND ITS TERMS. CMU AFFILIATED CLIENTS: I UNDERSTAND THAT I CAN BE ASSESSED A VIOLATION FOR NOT FOLLOWING THE POLICIES WRITTEN ON THE BOOKING CONTRACT. MORE THAN ONE VIOLATION OF THE POLICIES WILL RESULT IN A \$25.00 CHARGE FOR EACH FOLLOWING VIOLATION.

YES NO

For the Submit Request to work you will need to save this form before you fill it out then click Submit Request from your saved document