

Missouri State University
Reservations/Catering Request Form

Event Information

Dept/Organization _____ Phone _____

Name of Event _____

Type of Event (Circle Below)

Meeting Banquet Performance Workshop Party Film Contact Table Banner
Other _____

Estimated **number** of people: _____

Building and Room Preference (If known) _____

Single **or** Recurring Event? (Circle)**Single event:**

Date(s): _____

Mon Tue Wed Thur Fri Sat Sun

Recurring event:

Weekly, Every other week or Monthly?

Mon Tue Wed Thur Fri Sat Sun

Start Date: _____ End Date: _____

Room Unlocked by _____ AM/PM (circle AM or PM)

Event Starting Time _____ AM/PM Event Ending Time _____ AM/PM

Is this a fundraiser? Yes / No Will anything be sold? Yes / No

Will admission/registration be charged? Yes / No Will off-campus guests be invited? Yes / No

of parking passes needed (PSU only) _____ (Daytime passes for Lot 13—Visitor's Parking are \$2 each)

 No Food Planned Ordering from PSU Vendor Missouri State Catering for food (order below)

____ By initialing you verify that the food services requested are in compliance with the University Fiscal Responsibility Policy <http://www.missouristate.edu/policy/fiscalresponsibility.htm> and that you understand that expenses incurred that are inconsistent with the policy will become your personal responsibility.

Food Information (circle your choices below)

Is Food Service Requested? Yes / No What is requested serving time? _____

Type of Dinnerware: Paper / China Linen Color Preference _____

Served Meal **or** Buffet?

Please list requested menu (or attach additional sheet)

When do you want Food Service removed? _____

(If no time is given, room will be cleaned only after event ending time.)

All food at events on campus must be catered through Missouri State Catering Services or by a PSU vendor. Any exception has to be approved by the Director of Catering.

Name of Requestor _____

Organization or Department Name _____

Phone # _____ Email _____

Billing Information

Missouri State University Dept Budget # and Business Purpose (be specific): _____

(Off campus organization) Billing Address: _____

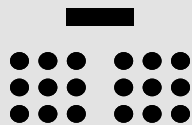
Signature (Must be Budget Administrator or Organizational Officer)

_____ Date _____

PSU Events Only - Set-up/Equipment needed

****All equipment/setup needs must be requested 10 working days in advance.****

Row Seating



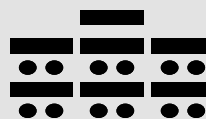
Conference*



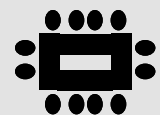
Dining*



Classroom*



Hallow Square*



Special _____
(If special set-up, please provide a sketch.)

(Circle below) Additional Equipment *an equipment charge will apply*

Outdoor Sound System

Indoor Sound System

Projector: LCD / w/screen w/sound

TV/VCR

Portable Stereo

Easel(s) # _____

Free Standing Podium

Tabletop Lectern with / without Microphone?

Phone

Microphone(s)# _____ : Corded or Cordless

Stage Sections (6'x8') # _____

Computer Cart with LCD Projector (with or without sound?)

Laptop Computer

Internet Connection

Additional Information concerning Set-up or Equipment needed _____

For Your Information

- *Food Service requests need to be made by **10 business days prior**, with the final count confirmed at least **3 business days** before the event.
- *One week notice must be given for all special set-up and/or equipment needs.
- *Charges will be assessed for damages, extra custodial needs, or extra building hours resulting from an event.
- *A fee applies for changing the standard set-up of any room in PSU. Standard set-up for meeting rooms is Row Seating. The Ballroom has no standard set-up and always incurs a charge.
- *Please return this form to Conference Services, Plaster Student Union 302. Retain a photocopy for your records.

Robert W. Plaster
Student Union

Missouri State University Conference Services
email: ConferenceServices@missouristate.edu

Phone: (417) 836-5653

Fax (417) 836-6765

Revised 8/09/11