Wesley Foundation Building Use Form

*The Wesley Foundation reserves the right to modify and/or change all reservations at any time*

**Event Description**

**Event Title:**

Details for the Public/Special Instructions \*

Requested Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Event Start Time: \_\_\_\_\_\_\_ Time of Day: AM or PM

Event End Time: \_\_\_\_\_\_\_\_ Time of Day: AM or PM

Number of Participants \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location Preferences (Please Circle One\*) Basement

Living Room

\*Preferences are based on first come first serve

Is this a recurring event? If yes, list additional days and times or date and time patterns

|  |
| --- |
|  |

Publicity

□ Open to Public

□ Campus Wide

□ Specific Group Only

**Contact Information**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Affiliation to Longwood University/Hampden-Sydney College

Sponsoring Department/Student Organization

Sponsoring Dept./Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Yes, our advisor approved this event

Advisor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Advisor’s Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Advisor’s E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOTE:**

* The Wesley Foundation reserves the right to modify and/or change all reservations at any time
* No one shall remain in the Wesley Foundation after it is closed without the permission of the Director.
* Animals are not permitted in the building at any time
* Associated fees will be charged to the client for extensive housekeeping needs. These charges are associated with, but not limited to: overtime, excessive mess, etc. As well as loss of privilege for using the Wesley Foundation building
* By signing this document you are held accountable as the group representative and if any issues occur will be contacted

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date