

# Event and Reservation Authorization Form

**INSTRUCTIONS:**

*This form is to be completed when your organization reserves space on campus and/or reserves any technical equipment that will be paid by your on-campus account.*

*1. Complete the top section and have your organizational representative sign at the bottom.*

*2. Turn the form into Quincey Hinson or Casey Hurst who will complete the rest and submit for payment.*

**Student Organization:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Contact Email:** \_\_\_\_\_

**Event Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Time:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Equipment/Tech Needed:** \_\_\_\_\_

**Estimated Attendance:** \_\_\_\_\_

**Estimated Expense:** \_\_\_\_\_

**Direct Bill Fund #:** \_\_\_\_\_

**Max. Authorized Amt:** \_\_\_\_\_

**Initial:** \_\_\_\_\_

**I understand and agree to take responsibility for charges associated with any reservation placed on behalf of the above referenced student organization. This authorization may be used to clear any unpaid invoices through the sponsoring student organization's on-campus account up to the maximum authorized amount listed above. Any balance remaining will be the personal responsibility of the sponsoring student organization.**

**Organizational Representative:** \_\_\_\_\_

**Divisional Representative:** \_\_\_\_\_

**Organizational Advisor:** \_\_\_\_\_

**SAFC Business Manager:** \_\_\_\_\_

**\*\*Your reservation will not be processed without this form.\*\***