

MSU Meridian Facilities Request Form

Date of Event: _____ Name of Event: _____

Event Start Time: _____ End Time: _____ Number of Participants: _____

Set-up Date/Time: _____ Daily Access Time: _____

Is Prior Day Access needed? (A fee of \$225 will apply) Yes No

Organization/Division: _____ Contact: _____

Contact Phone: _____ Email: _____

Description of Event: _____

Cost to Participants: _____

Set Up: Theater Classroom Conference Rounds Reception U-Shape
 Other _____

A/V: Yes No Date/Time IT Assistance is needed: _____

Equipment Requested: Built-In Computer Laptop Connectivity
 DVD Player Podium w/Mic Wireless Lapel Wireless Hand Held
 Projector Screen Other _____

Food/Beverage: Break Service Plated Meal Buffet Meal
 Hors d'oeuvres Other _____

Caterer Contact Name/Number: _____

Caterer Set-up Date/Time: _____ Access Time Day of Event: _____

Caterer/Organization is responsible for removing all trash items (i.e. boxes, garbage, food waste, etc.) from the facility. Trash may be placed in the dumpster at MSU-Meridian.

Contact Mailing Address: _____
