

STUDENT ROOM RESERVATION REQUEST FORM

(Revised January 27, 2010)

PLEASE COMPLETE ALL FIELDS AND RETURN TO

OFFICE OF EVENT MANAGEMENT Student Center Room 112, (516)463-6631, Fax: (516)463-6520

REMINDER: COMPLETING THIS FORM DOES NOT GUARANTEE A RESERVATION.

Please make yourself familiar with the Scheduling Guidelines for Student Organizations before requesting space.

ORGANIZATION INFORMATION

Organization _____
Budget# _____ Co-sponsoring organizations (if applicable) _____
Contact Name (Requestor) _____ Phone # _____
HOFSTRA E-MAIL ADDRESS _____
(Confirmation Notice is sent to this address)

EVENT INFORMATION

Event Name _____
Event Type (CIRCLE ONE)
Banquet/Reception Conference/Symposium Festival Fundraiser
Exhibit Information Table Lecture/Speaker Meeting/Seminar
Movie Orientation Party Practice/Rehearsal
Performance/Show Live Entertainment/Concert Non-Academic Class/Workshop
Other (please specify) _____

Describe this Event _____

EXPECTED ATTENDANCE

Hofstra University Students _____ # Hofstra University Faculty/Staff/Administration _____
Participants who are not members of Hofstra University _____
Total anticipated attendance (including presenters and event organizers) _____

REQUESTED TIMES

Pre-Event Time (time you would like to enter event space to prepare for your event to begin) _____ AM/PM
Event Start _____ AM/PM Event End _____ AM/PM
Post Event Time (time you expect to be done removing materials after your event) _____ AM/PM

REQUESTED DATES

Day/Date(s) _____
Alternate Date Choices _____
Event Repeats: Weekly Every Other Week Monthly

SPACE/AREA PREFERENCE

Best Available _____ 1st CHOICE _____ 2nd CHOICE _____ 3rd CHOICE _____

SPACE SETUP

CHOOSE ONE ROOM LAYOUT

- Clear Room (Room is set with little or no furniture)
 Theater (Room has fixed row style seating)
 Row (Room is set with chairs only set side-by-side, facing front of room. Podium or table included at front)
 Round Tables (Room is set with round tables. Each table can accommodate between 8 & 10 chairs comfortably)
 Conference (Existing table or a combination of tables used to form a solid conference table. Good for small group business meetings)
 Classroom (Room set to include seats with writing surface for all guests. In most cases, 6ft rectangle tables or a desk provide the writing surface)
 Circle (Room set with chairs only in a full circle configuration. Good for icebreaker activity or discussion)
 Semi-Circle (Room set with chairs only in a semi circle configuration)
 U-Shape (Room set with tables to provide an open U shape conference table with chairs around the perimeter. Good for group activity including a discussion)
 Hollow Square Conference (Room set with tables to provide an open center complete square/rectangle shape conference table with chairs around the perimeter)
 Other (The general set up does not fall into one of the layout categories. A diagram is recommended)

FURNISHINGS – CHOOSE QUANTITY FOR EACH ITEM

- Chairs
- 6' Rectangle Tables
- Round Tables
- Blackboard/Whiteboard
- Coat Rack
- Flip Chart
- Skirts for Tables
- Podium
- US/Hofstra Flag
- Stage Section (6FT x 8FT, 24" High)
- Food Service Tables needed (if serving food)
- NO ITEMS NEEDED**

SET UP INSTRUCTIONS _____

AUDIO/ VIDEO EQUIPMENT- CHOOSE QUANTITY FOR EACH ITEM

- CD player
- DVD player
- Cassette player
- Video Cassette Recorder
- Podium Banner
- Portable Sound System (Describe below)
- Slide Projector
- Video/Audio Recording +
- Video Projector (computer presentation)
- Overhead Projector
- Wired Microphone
- Lapel Microphone*
- Wireless Microphone*
- NO ITEMS NEEDED**
- AV Technician Present During Event (Must be requested at least 1 week in advance) +

***NOT AVAILABLE IN ALL LOCATIONS**

+ EXTRA CHARGE MAY APPLY

AV INSTRUCTIONS _____

OTHER EVENT INFORMATION

- Are there entrance or attendance fees? YES NO Advance price \$ _____ Door price \$ _____
- Box Office- MONROE HALL
 - Alcohol Service
 - Hosting Guest Speaker
 - Stage Lighting- MONROE
 - Changing Room- MONROE
 - Guest Photography Permitted
 - Live Entertainment –MONROE AND HOFSTRA USA
 - Additional Equipment (describe below)
 - Food Service (CONTACT LACKMANN CULINARY SERVICES, x3-5395)

SPECIAL EVENT INSTRUCTIONS _____

PLEASE UNDERSTAND THAT REQUESTING ANY OF THE FOLLOWING WILL REQUIRE SIGNATURES FROM THE APPROPRIATE OFFICES AND CAN BE OBTAINED ONCE YOU HAVE RECEIVED A TENTATIVE CONFIRMATION FORM.

- Events in Hofstra USA** – Student and Leadership Activities, Public Safety, Director of Dining Services, SGA Club Affairs Chair (For Friday and Saturday events only)
- Events in Monroe 142**- Campus Department Program Office,Public Safety, Director of Theater Facilities(For Ticket Booth or Stage Lighting)
- Events with Admission Fees**- Campus Department Program Office, Public Safety
- Events with Off-campus Speakers and/or External Entertainment** - Campus Department Program Office, Public Safety
- Events that are Outdoors and/or Open to the Public**- Campus Department Program Office, Public Safety

WEB POSTING INFORMATION

- Please consider posting my event to the <http://www.hofstra.edu/events> web calendar when it is confirmed.
- If so, please provide the exact description of your event as you would like it to be posted online for potential guests.
- _____
- _____

For help with your description, download the Event Description guide [PDF], found at <http://www.hofstra.edu/eventdescriptionguide>. You will be held responsible for the content of your calendar posting, so make sure your information is correct and that you adhere to the Code of Community Standards, found at <http://www.hofstra.edu/communitystandards>. The Office of Event Management offers this option solely as a convenience to the Hofstra Community and makes no offers or guarantees connected to it. If you have questions, e-mail the Office of Interactive Media at webwork@hofstra.edu.

REQUIRED SIGNATURE

I UNDERSTAND THAT THIS IS A REQUEST ONLY AND DOES NOT GUARANTEE AN APPROVED RESERVATION. I AM AWARE OF THE CANCELLATION POLICY. I WILL OBTAIN THE ADDITIONAL SIGNATURES IF NEEDED ONCE I HAVE RECEIVED A TENTATIVE CONFIRMATION VIA EMAIL FROM EVENT MANAGEMENT; OTHERWISE MY EVENT WILL BE CANCELLED. THE STATUS OF MY REQUEST WILL BE EMAILED TO ME WITHIN 3 BUSINESS DAYS OF THE RECEIPT OF THIS COMPLETED FORM.

YOUR SIGNATURE _____ **DATE** _____

OFFICE USE ONLY

RECEIVED BY: _____ DATE/TIME: _____

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