Name of Organization/Department: ____________________________________________________________

☐ On Campus Group    ☐ Off Campus Group

Contact Person: ____________________________________________________________

Event Name: ____________________________________________________________

Date Of Use: ________________

Anticipated Attendance: ____________________________

Please designate which room set-up you will require (please see reverse side)

Do you wish to decorate the room?        ☐ No ☐ Yes

Will you require food service arrangements?        ☐ No ☐ Yes

If yes, type of service planned: ☐ Beverage set up        ☐ Buffet Meal        ☐ Sit Down Meal        ☐ Refreshments

Please check desired facilities

☐ Conference Room 205    ☐ Conference Room 206C

☐ Conference Room 206 A&B    ☐ Reception Center*

☐ Conference Room 206A    ☐ Senate Chamber*

☐ Conference Room 206B    ☐ Common Grounds*

☐ Conference Room 213    ☐ Courtyard*

*Availability is limited

Seating Capacity

<table>
<thead>
<tr>
<th>Room</th>
<th>Conference</th>
<th>Theatre</th>
</tr>
</thead>
<tbody>
<tr>
<td>205</td>
<td>16</td>
<td>42</td>
</tr>
<tr>
<td>206 A &amp; B</td>
<td>16</td>
<td>42</td>
</tr>
<tr>
<td>206A, B or C</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td>213</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Senate Chamber ........ 60 *Reception Center .......... 22
*Room 213 ............. 10 *Common Grounds ....... 110
*These rooms have fixed room set-ups. They cannot be altered.

Please note all food service and beverage arrangements must be made through Aramark. Please call (570) 422-3865. Also note that all audio-visual equipment must be reserved through instructional resources. Please call (570) 422-3501.

Organization/Department representatives acknowledge by their signature that they have read, understood and agree to the policies governing the use of the University Center. Failure to use this facility responsibly may result in a future loss of privileges. Organizations will be assessed for damages or extraordinary custodial care.

On Campus:

Student Officer Responsible

Organization Advisor

Department Official

*Off Campus

Organization Representative

Approval

Director of the University Center & Student Activities/Date or Designee

*Notice: All non-University groups using University Center facilities shall “hold harmless”— the University, the Student Activity Association, Inc., the State System of Higher Education, and the Commonwealth of Pennsylvania — against all claims which might subsequently arise from the user, participant, or anyone directly or indirectly employed by the user/requester or the facility.

For Official Use Only • Do Not Write Below This Line

Date Reservation Received: ____________________________ By: ____________________________

Location: ____________________________ Rental Fee: ____________________________ Location: ____________________________ Rental Fee: ____________________________

Location: ____________________________ Rental Fee: ____________________________ Location: ____________________________ Rental Fee: ____________________________

Room Charges $ ____________________________ Date Received: ____________________________ By: ____________________________

Comments: __________________________________________________________________________________________