

Media Support/Set-up (Check boxes with needed item)

Tables needed _____ #Chairs needed _____ Trash Cans

TV TV Stand VCR DVD Player Screen Table Podium

Standing Podium (Ballroom and Eastroom ONLY)

PA System (Ballroom and Eastroom ONLY)

Media Cart (Ballroom/Eastroom/Alumni Lounge ONLY-contains laptop and projector)

Digital Projector Laptop Camcorder & Tripod (Must be picked up at Schewel 238)

Any Additional Set up Needs _____

Your signature indicates that you will comply with the Room Usage Policy for the particular space to be used. The sponsors of the activity will abide by the college policies and procedures as they apply to this activity. The organization assumes responsibility for any damage to college facilities caused by sponsors or participants of this activity. **The organization must be registered and recognized by the Office of Student Activities.**

| | |
|---------------------------------|--|
| Organization Representative | Box# |
| Name of person completing form: | Phone # Office/Room Extension or Cell: |
| Signature: | Email: _____@students.lynchburg.edu OR Other Email Address: |

For Office Use ONLY:

Space reserved on: _____

Room usage policy for the specific space has been given to organization with confirmation.

Special Instructions given to organization:

The area below is for authorized signatures only. The event is not considered AUTHORIZED until all affected offices have approved the event.

Organization Activities and Accounts Manager Signature