ALFRED LAWSON JR. MULTIPURPOSE CENTER EVENT SUMMARY FORM

CONTACT: Lawson Center Business Office (850) 412-5966 voice \$ (850) 412-5991 fax

REQUESTORS WILL BE NOTIFIED IF/WHEN REQUEST HAS BEEN APPROVED PER CONTACT INFORMATION BELOW

INSTRUCTIONS: Please fill out c	completely. *=Information Required.
<u>REQUESTOR INFORMATION</u>	
*Contact Person:	*Telephone Numbers: <u>(W)</u>
*Organization:	FAX:
*Address:	(C)
	*e-mail:
	Account Number:
*Event Name/Purpose	*SPACE REQUESTED
*Date Requested:	*Your Arrival Time:
(Note: Each date requested must use a separate form)	
*Estimated Length of Event:	*Event Start Time:
*Contact Person's Signature:	OFFICE USE ONLY Reservation #
*Approved By:	Date Received:
University Approval Only	
	Received By:
PRODUCTIO	N DESCRIPTION
	TELY AND ACCURATELY for booking to be approved:
	ttion. Requests without documentation may be denied.
	ence, etc.): Please check the appropriate box and elaborate below:
□Concert/Festival □Gala/Banquet □Lecture/S □Sports Event □Commencement/Convocation □ □Trade Show □Recruitment Event □Other (ple *Detailed Description: □	0
*Estimated Attendance: T	Ficketing Arrangements:
*PARTICIPANTS: Please give the number of people particip MC/Speakers	pating in the following categories
Performers	
Technicians, Stage Managers, Directors	
Band/Music Groups	
(Number of groups/type of group/nt	umber of people in each group)
Lighting Needs:	
Audio Needs:	
Facility Needs (Stage, Podium, screens, video or slide project	tion, furniture, etc):
Amenities (Souvenir sale arrangements, concession stands, sp	pecial promotions, media support, etc.):