

## OFFICE OF THE REGISTRAR

322 Student Union Stillwater, Oklahoma 74078-1013 405-744-6876 | **O** registrar@okstate.edu

## **GU ROOM REQUEST FORM**

| Event Name*          |   |
|----------------------|---|
| Expected Attendance* |   |
| Organization*        |   |
| First Name*          |   |
| Last Name*           |   |
| Banner ID/CWID*      |   |
| Email*               |   |
| Phone Number         | (xxx)-xxx-xxxx  |
| Start Time*          | Time (xx:xx am/pm)  |
| End Time*            | Time (xx:xx am/pm):   |
| Date*                | Start Date (xx/xx/xxxx)*: End Date (xx/xx/xxxx)*:   |
|                      | Occurrences:  |
|                      | One Time: Weekly: Monthly: Unique:  |
|                      | Unique Date Description:  |
|                      |   |
|                      | (If you have a unique meeting time - for example, twice a week or the first day of Tuesday and Thursday of every month - please provide an explanation of your meeting time.) |
| Room Choice #1*      |   |
| Room Choice #2       |   |
| Room Choice #3       |   |
| Comments             |   |
|                      |   |
|                      | (Please give a brief explanation of why you are requesting the room or any additional information you would like provide.)  |
| Terms and Conditions | Food, drink, and charging for attendance for events is not allowed in General University rooms.   |
| Agree to Terms and   | Yes, I agree  |
| Conditions*          | No, I do not agree  |