Student Organization [Blue Form]
KILCAWLEY Meeting Room Request & Table Space

Name of Student Organization: [print] _____________________________
Today’s date: _____________________________

We wish to reserve [mark one box]: ☐ table OR ☐ meeting/ event room[s]
Fill out this line for a room[s]. This is for a: ☐ Group Meeting OR ☐ Event. List name of event: _____________________________

1. Date we wish: _____________________________ Day of week: _____________________________
2. OR, if this meeting/event is to occur EVERY week complete the boxes below:
   Meeting/Event is every: ☐M ☐Tu ☐W ☐Thr ☐Fri ☐Sat
   During: ☐Fall term ☐Spring term ☐Summer term
   Include: ☐Finals Wk ☐Breaks ☐None of these

3. Start time/people arrive: _____________________________
4. End time/vacate room: _____________________________
5. Number of people to attend your meeting: __________
6. Room / Space Choice: Mark the box[s] below that fit your group’s needs:
   ☐ We prefer the same location each date, but when not possible, we will gladly accept ANY available room [or table space].
   Comments: _____________________________
   ☐ We are flexible—any room [or table space] is good!!
   ☐ If available; we have a preferred room [or table location]: 1st Choice _____________________________ 2nd Choice _____________________________
   Note: Cafaro Multipurpose Room can not be scheduled for regular meetings.

7. Any special setup needs? [Podium, mic’s, Cd player, DVD player, Power Point, Computer setup / Internet.] List your needs below: _____________________________

8. Food? ☐ None needed. ☐ Yes, we will contact Catering.

∫ This box must be completed or your room reservation will NOT be processed:
Your organization’s contact person about the room or table reservation:
Name: [print] _____________________________
Cell: [ _______ ] _____________________________
Email: [print] _____________________________
Your Organization’s President’s Name: [print] _____________________________
Cell: [ _______ ] _____________________________
∫ You MUST confirm with your President that you are reserving the correct day, time, and dates. DO NOT make the reservation unless you are FIRM on your dates and times! Thank you!

READ THIS!
Return this form to Kilcawley Staff Office to Student Room Reservation Desk.
1. Drop the form off. It will be returned to your student organization mail box in three school days.
2. If we have questions we will call you.
3. We will not make reservations while you wait.

THE ‘BLUE FORM’ CAN BE MAILED:
YSU / Kilcawley Staff Office
Chris Pullium / Reservations
One University Plaza
Youngstown, Ohio. 44555-3571

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