



University of Pittsburgh at Titusville

Office of Student Activities

504 East Main St.
P.O. Box 287
Titusville, PA 16354
Telephone: (814) 827-4455
Fax: (814) 827-4450
E-mail: stthomas@pitt.edu

STUDENT ORGANIZATION RESERVATION FORM

NOTE: All three pages of this form must be completed and submitted to the facilities office; including all setup and/or service requirements, **at least one week in advance** of the date of the event. Completing this form does not guarantee your reservation until you receive confirmation from the Office of Facilities.

Requesting individual _____ Advisor _____

Requester's Telephone Number _____ Advisor's Email _____

Requester's Email Address _____ Faculty/Staff Member Attending _____

EVENT INFORMATION

Name of Event _____

Type of Event ☐ Meeting ☐ Dance ☐ Speaker ☐ Banquet ☐ Practice
☐ Community Service Project ☐ Fundraiser ☐ Event
☐ Other, please be specific _____

Date(s): _____

Attendance Expected _____ Admission Fee _____

Program Open To: ☐ Public ☐ Students ☐ Faculty/Staff

RESERVATION INFORMATION

Location		Date and Times				
Building	Room	Month/Day/Year	Setup Start Time	Event Start Time	Event End Time	Cleanup End Time

Include time for setup and cleanup; the building will be unlocked and locked at times requested above. The organization is responsible for completely cleaning the area(s) used every time it is used. A staff or faculty member must be present to represent the University at all activities, meetings, events, etc. for student organizations.

STUDENT ORGANIZATION RESERVATION FORM

SET UP, SERVICES, EQUIPMENT NEEDS

ROOM SET UP (number if appropriate)

☐ Tables
☐ Chairs
☐ Piano
☐ Podium
☐ Staging
☐ Other _____
☐ Other _____

PERSONNEL SERVICES

☐ Projectionist
☐ Lighting
☐ Sound
☐ Custodial
☐ Security
☐ Other _____
☐ Advisor _____

EQUIPMENT (specify type and number)

☐ Microphone _____
☐ CD Player _____
☐ Stage Lighting _____
☐ Computer _____
☐ Other _____
☐ Other _____

CATERING (check all that apply)

☐ Buffet Line
☐ Sit-Down Meal (served)
☐ Reception
☐ Breakfast
☐ Lunch
☐ Supper
☐ Pastry/Coffee
☐ Coffee, Soda Service
☐ Coffee Service Only
☐ Other _____

NOTE: SPECIFIC CATERING ARRANGEMENTS
MUST BE MADE WITH FOOD SERVICE

VISITOR PARKING: Visitors must pick up a parking pass from the Campus Police Office in Spruce Hall or park on the street.

**PROVIDE A DIAGRAM AND DETAILS OF SET UP REQUIREMENTS ON THE NEXT PAGE
SPECIAL PROCEDURES APPLY TO THE USE OF CAMPUS AUDITORIUMS.**

AUTHORIZATION

I understand that this event must be carried out in accordance with the relevant policies and procedures of the University of Pittsburgh and the Titusville Campus, and, if applicable, with the laws of the Commonwealth of Pennsylvania. I acknowledge that any damage to equipment or property resulting from this event will be charged to my department or organization.

Signature of Requester _____ Date _____

Signature of Advisor _____ Date _____

Signature of Staff/Faculty Member Attending _____ Date _____

Signature of Student Affairs Designee _____ Date _____

STUDENT ORGANIZATION RESERVATION FORM

Please draw a diagram of all setup requirements in the space below and provide any additional information related to the event. Use a separate sheet if necessary.

Please be specific!

If you have any questions about the facilities availability, please call 814-827-5567.