

Room Reservation Request and Agreement at Vanderbilt Hall Athletic Facility:

Your Name: _____ Harvard Status (Student/Staff/Faculty) _____
Email Address: _____ Phone Number# _____

Event Date: _____

Event Time (starting & ending times): _____

Will this be a reoccurring event? yes ___ no ___ Additional Dates: _____

Event Location within the Athletic Facility: _____

Event Name: _____

Name of Student Club, Organization or Group: _____

Harvard Department Sponsoring the Event or Harvard Affiliation: _____

Contact Person's Name, Address, Telephone and Email: _____

Alternate Contact Person's Name, Address, Telephone and Email: _____

Approximate Number Attending:

- Harvard/Affiliate: _____
- Non-Harvard/Affiliate: _____
- Is this event open to the public: Yes: _____ No: _____

In the space below, please describe the activity that will be taking place:

Will there be an instructor for this event?

No _____
Yes _____ (If yes, please provide the name and contact information for the instructor.)

Will outside equipment be brought to the facility?

No _____
Yes _____ (If yes, please provide information on the personal equipment)

Will there be non-Harvard participants at this event?

No _____
Yes _____ (If yes, please provide a summary of who will be attending)

For Office Use Only:

Staff Decision: Approve: _____ Disapprove: _____ Date: _____

Reasons for Denial:

Additional Information: