Facilities & Business Services Special Events items Request/Agreement

Notes: You will be notified via phone or email if the request cannot be filled.

Organization Name:		Event Description:		
Person of Contact:		Phone Number or Email:		
Event Date:	Event Time:	Delivery Date:	Delivery Time:	
Pick Up Date:	Pick Up Time:	Location of Event:		
Please choose all that apply:				
Pick Up:	Set-Up:	Porter:	(# of Porters Needed:)	
<u>Items Available</u>			Amount Requesting	
Tables (8 foot)				
Folding Chairs				
44 Gallon Trash	Cans			
Recycling Bins				
Is there a specific layout	t need? YES NO	If yes, please attac	ch.	
Comments/Special Instr	uctions:			
Expected Attendance: _				
Signature of Requestor			 Date	

Please sign and deliver to Torri Cheney tcheney@tntech.edu / TTU Box 5041