Facility Requested: Johnson Coliseum        Date of Request:_____________________

Event Information:

Name of Organization/ SHSU Dept. / Company: ______________________________________________________

Event Title: ____________________________________________________________________________________

Date(s) of Event: _____________________________ Anticipated Maximum Attendance:___________________

Time of Event: _____________________________ a.m. /p.m. To: _____________________________ a.m. /p.m.

Date of Setup: ______________________________  Start Time: _____________  End Time:______________

Contact Information:

Name: ___________________________________________________________________________ Email:______________________________

Phone #: ____________________________________ Alt Phone #:_______________________________________

Description of Event:

• A brief description of the event will need to be provided on the lines below or on a separate document attached to this form. (Please include as many details as possible. This will help us provide the best space and services available.)

□ Banquet  □ Social Event  □ Athletic  □ Entertainer  □ Other (please explain)

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Who will be attending the event: (Check all that apply)

□ SHSU Students
□ Non- SHSU Affiliated Guest
□ Both SHSU & Non-SHSU affiliated guest

Admission/ Registration/ Entry Fee/ Donation/ Fundraiser: (Check all that apply)

□ No   □ Yes; If yes, How Much $___________

□ If yes, tickets sold at Door? $_________ and /or Pre-sale $__________
Facility Reservation Form (Page 2)

Room Arrangement:
- [ ] Chairs
- [ ] Tables (The Coliseum has a maximum of 22 tables)
- [ ] Diagram Attached (if not at the time of submitting this form, then it must accompany the Event Info Form)
- [ ] House Sound System
- [ ] 16 x 24 Stage
- [ ] 44 x 24 Stage

Statement:
- All event reservations must be made no less than 60 days of the event.
- All event cancellations must be done no less than 60 days of the event to receive partial, if any, refund.
- All advertisements for the event must be approved by Sam Houston State University prior to the event. This includes but is not limited to social media, posters, flyers, brochures, etc.
- The facility manager may determine a need exists for security services. University Police and the facility manager, will discuss and determine the number of officers needed to host the event.
- As of 11/01/2012, Purchaser or Lessee is required to fax or email the ticket counts (sold and comps) every Friday. The week of the show Johnson Coliseum requests ticket counts every day. Ticket counts for concert engagements must come from the Lessee or 3rd party box office via certified statement only. If we do not receive these counts every Friday, we will consider that there is a problem and the show may be cancelled immediately by [Venue or Lessor] and the Lessee will forfeit any monies and/or deposits held in the Johnson Coliseum account.

As the authorized representative, I understand and agree to the following statements: “The information I have provided is true and accurate. If changes occur or are required after this request is submitted, I will notify the SHSU Johnson Coliseum in writing. I acknowledge my responsibility for all charges associated with this event. I further agree that it is my responsibility to be familiar with the applicable SHSU policies as they relate to the event described on this request.”

Misrepresentation of information given above may result in disciplinary action.

Signature: (Required)

Student Organizations Only:

Name of Organization

Student Organization Advisor (Please Print)

Student Organization Advisor (Signature)  (Date)  

Student Organization Advisor  (Email)

University Police Department:

UPD (Signature)  (Date)  Number of Officers  

Yes, We can provide officers

No, We cannot provide officers

***************For Administration Use Only***************

Date reservation received ____________________________  □ Event Approved  □ Event Denied

University Safety Officer: (If needed) ____________________________ Date:________________

Final Conformation:

Facility Manager: ____________________________ Date:________________

Signature:_________________________________________