



Campus Activities Board
SAM HOUSTON STATE UNIVERSITY

Miss Sam Houston & Miss Piney Woods
Appearance Request Form

Contact Name: _____ Phone: _____
Organization: _____ Email: _____
Event Title: _____
Date of Event: _____ Time of Event: _____
Event Location: _____ Anticipated Attendance: _____
MSH/MPW Arrival and Departure Time: _____

What would you like for Miss Sam Houston to be doing during the event (Be Specific)?

Example: Miss Sam Houston will be signing autographs after the event. During the event we would like her to announce award winners.

Other Details about the event:

IMPORTANT NOTICE: Turning in this form does not guarantee the appearance of MSH & MPW at your event. After the form has been reviewed a CAB Representative will contact you with further details. Please allow a minimum of 5 business days for proper processing. For more information, contact Campus Activities & Traditions at (936) 294-3077 or bdotson@shsu.edu

SIGNATURE: _____ DATE: _____

FOR OFFICE USE ONLY:

RECEIVED ON _____ APPROVED / DENIED INITIAL: _____ DATE: _____

Please email this completed form to bdotson@shsu.edu