

# Multicultural Center BOOKING REQUEST

Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**DAY of Event** (e.g. TUESDAY): \_\_\_\_\_  
*(If events fall on different days of the week—e.g. Wednesday and Thursday—fill out a separate request form for each day.)*

**DATE(s) of Event:** \_\_\_\_\_  
*(List ALL the dates if scheduling for a regular meeting)*

**BEGIN TIME** of Event: \_\_\_\_\_ **END TIME** of Event: \_\_\_\_\_

Projected **NUMBER** of people to attend: \_\_\_\_\_

**ROOM** needed for Event:     Heritage Rm     Conference Rm     Cafeteria Space  
*(Check all that applies)*                      *(capacity 45)*                      *(capacity 15)*                      *(capacity 80)*

**TITLE of EVENT:** \_\_\_\_\_

**PURPOSE of EVENT:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you planning to have food/refreshments?     Yes     No  
*IF "yes", PLEASE REFER TO "CENTER USE POLICIES & REGULATIONS" Item 6 (on back of this form)*

**GROUP/Person** requesting room: \_\_\_\_\_

Contact person for event: \_\_\_\_\_

Email address of contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
*(PLEASE WRITE LEGIBLY)*

**Please submit all requests a minimum of two weeks in advance before the requested date(s).  
Approval of requests will be made either via phone, email, or in person.**

**PLEASE RETURN TO:**  
**MULTICULTURAL CENTER**  
MSU Union, Abbot at Grand River  
East Lansing, Michigan 48824-1029  
FAX: 517/ 432-4660                      Phone: 517/ 432-7153

\*\*\*\*\*FOR OFFICE USE ONLY\*\*\*\*\*

Reviewed by: \_\_\_\_\_ Date reviewed: \_\_\_\_\_

Responded:  By Email on: \_\_\_\_/\_\_\_\_/\_\_\_\_     By Phone on: \_\_\_\_/\_\_\_\_/\_\_\_\_     In Person on: \_\_\_\_/\_\_\_\_/\_\_\_\_

Action taken: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contacted Union Scheduling: \_\_\_\_\_