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| **Please read the Stocking Hall Space Reservation and Use Policy before signing this agreement –**  **you are responsible for meeting all requirements of this policy:** [**http://blogs.cornell.edu/stockingfacilities/**](http://blogs.cornell.edu/stockingfacilities/) | | | | | | |
| **Event Reservation Details** | | | | | | |
| **Today’s Date** |  | | **Date(s) of Event** | | |  |
| **Event Title** |  | | **Sponsoring Department** | | |  |
| **Set Up Start Time** |  | | **Event Start Time** | | |  |
| **Event End Time** |  | | **Clean Up End Time** | | |  |
| **Room(s) Requested** | *Highlight requested spaces below* | | **Estimated # Attending** | | |  |
| *148 Stocking Conf. Center* | *Catering Kitchen* | | *Stocking Commons* | | | *Stocking Gallery* |
| *PepsiCo Audit. 146 Stocking* | *Classrooms (M01, 201, 202)* | | *Conf. Rooms (M24, M26, 315)* | | | *Product Dev. Kitchen* |
| ***EVENT DETAILS: Describe your event in the space below; including food, furniture, decorations, lighting, sound, access required Door access will be set to the times you list above as setup/clean up, please be sure they are accurate. (use additional pages if needed)*** | | | | | | |
|  | | | | | | |
| **UUP Form** | A UUP Form ([http://www.activities.cornell.edu/EventReg/),](http://www.activities.cornell.edu/EventReg/),%20must%20be%20completed%20) must be completed if the event includes: ● Catered food● Alcohol ● More than 200 attendees ● Money that is collected (sales or fundraising) ● Activities that may be seen as controversial and/or high risk ● Takes place outdoors | | | | | |
| **Event Coordinator Information** | | | | | | |
| **Name** |  | | **Net ID** | | |  |
| **Office Phone** |  | | **Cell Phone #** | | |  |
| **Caterer Information** | | | | | | |
| **Caterer Name** |  | | **Caterer Cell Phone #** | | |  |
| **An Event Coordinator(s) must be ON-SITE during all aspects of the event, from set up to clean up. Event Coordinators and Caterers must have cell phones listed on this form. All caterers must have appropriate liability insurance coverage, must have Cornell University listed by name on their policy, and must have the appropriate health licenses. Only Cornell approved caterers are to be used.** | | | | | | |
| **Event Fee Information** | | | | | | |
| **Event Services & Fees** (please give the Service request # to us after you make the arrangements for AV and Custodial Services) |  **AV Support** (mandatory for videoconferencing – contact Video  Collaboration Services at 255-2345 or cit-av@cornell.edu) | | | | | **Service Request #** |
|  |
|  **Custodial Services** (mandatory for catered events, 4-hr minimum). Contact Customer Service at 255-5322 if you have a standing work order. Or contact Linda Howe 255-3138 – llh7@cornell.edu to make arrangements. | | | | | **Service Request #** |
|  |
|  **Space Use**–. *Any special furniture or equipment needs must be planned. If you wish furniture to be moved, submit a diagram to us and we will arrange for the furniture removal and replacement (soft furniture in the Gallery area will not be removed). Removal, storage and replacement of furniture will be at the expense of the group using the facility.* | | | | | **Account Number** |
| **Account number is required for all reservations:** |
| **Estimated Fees**  **(to be completed by Stocking Hall staff)** | **Space Use Fees:** | | |  | | |
| **Stocking Space Reservation Policy Review** | | | | | | |
| I have read, understand and agree to abide by the Stocking Hall Space Use Policy on the blog [**http://blogs.cornell.edu/stockingfacilities/**](http://blogs.cornell.edu/stockingfacilities/) | | | | | | |
| **Name (print)** | | **Title** | | | **Signature & Date** | |
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**Reservation Form Submission and Confirmation:** Your space will not be confirmed until this form is submitted and you have provided all of the necessary documentation including Account Number, Custodial Service Request #, AV Service Request # and UUP form as applicable. You will receive a confirmation e-mail once these items are complete. Please forward a copy of this reservation form to Cindy Uhrovcik at clw3@cornell.edu