

*Instructions: Please print clearly with a ball point pen.
A copy will be returned to you upon completion.*

CALIFORNIA STATE UNIVERSITY, NORTHRIDGE
APPLICATION FOR FIELD/SPACE RESERVATIONS

Name and Type of Event/Activity		Date of Application
Name of Organization(s) Sponsoring Activity		
Name of Person Making Application		Position in Organization
Organization Advisor		Advisor's Telephone
Applicant certifies that: <i>The proposed activity is to be conducted in accordance with the policies and procedures stated in the Facilities Manual and accepts the responsibilities described.</i>		
Signature	Address (please include city, state, zip)	Telephone (w/area code) ()
Space Requested	Lot(s) Requested	Estimated # of People Attending
Nature of Use		Acct# to be charged for services rendered
Day(s) and Date(s) of Event: _____	Reserved from: _____ a.m. - _____ p.m. _____ a.m. - _____ p.m.	Starting Time of Event
		Concluding Time of Event
Will an admission fee be charged?	Yes No _____	If so, please indicate amount: _____
Parking fees included in admission?	_____	Please describe the use of funds raised: _____
Parking Services Chargeback # _____		_____
Will there be an off-campus speaker?	_____	If yes, name and title: _____
Will there be distribution of any literature?	_____	_____
Will there be sales & solicitation (general)?	_____	
Will there be sales & solicitation (food)?	_____	
Will food be served?	_____	
Will alcoholic beverages be served?	_____	
Will films or other productions be viewed?	_____	
Notice to area directors: <i>A space reservation will not be confirmed without appropriate signatures. Your signature indicates that special permits, clearances, or other requirements have been met or that needed arrangements have been made to satisfy these requirements.</i>		
<input type="checkbox"/> Initial consultation		Student Development/Int'l Programs (USU 113SW, x2393) Date
<input type="checkbox"/> Field usage <input type="checkbox"/> Oviatt Lawn		Recreation Sports (x3225) and/or Athletics (x3208) Date
<input type="checkbox"/> Other locations		Appropriate Signature Date
<input type="checkbox"/> Security		Public Safety (Park Bldg #14, x2201) Date
<input type="checkbox"/> Safety clearance Charges (est): _____		Parking (Park Bldg #14, x2157) Date
<input type="checkbox"/> Lot attendant Charges (est): _____		Environmental Health & Safety (Park Bldg #14, x2401) Date
<input type="checkbox"/> Food clearance		University Licensing (Adm 710, x2519) Date
<input type="checkbox"/> Community impact		Physical Plant Mgmt (18226 Halsted, x2222) Date
<input type="checkbox"/> Appropriate insurance certificate(s) rec'd (copy attached)		Media Library (Oviatt Library Rm#28, x2211) Date
<input type="checkbox"/> Special set-up		University Corporation (above bookstore, x5511) Date
<input type="checkbox"/> Custodial services Charges (est): _____		
<input type="checkbox"/> Special equipment		
<input type="checkbox"/> Food services		
<input type="checkbox"/> Special request Charges (est): _____		
<input type="checkbox"/> Request for exception to established policy for facility usage:		
<input type="checkbox"/> RESERVATION CONFIRMED		Student Development/Int'l Programs (USU113SW, x2393) Date