

*Instructions: Please print clearly with a ballpoint 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:	Starting Time of Event	Concluding Time of Event
_____	_____ a.m. - _____ p.m.	_____	_____
_____	_____ a.m. - _____ p.m.		
	Yes    No		
Will an admission fee be charged?	_____	_____	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"/> 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