

WKUF-LP Event Request

Event day, date: _____ Event beginning and ending times: _____

Today's date: _____

Organization: _____

Contact: _____

Phone: _____ Email: _____

Event type & title: _____

Event location: _____

Time room is available for set up? _____

Professional sound system needed? _____ Lighting effects needed? _____

Music requests/type: _____

Other special requests: _____

WKUF reserves the right to refuse an event. Service must be requested at least 14 days before the event specified above. Change of contract parameters must be made at least 7 days before the rescheduled date – failure to do so may result in loss of service for event. Client is held solely responsible for damage done to equipment during the event specified above. Client is responsible for full price of damages done during the event specified above. Make checks payable to Kettering University. By submitting this contract you, the client, agree to the terms stated above and the charging policy as outline on web site.

Office use only

Event approved: yes no

Check received: yes no Amount: \$ _____

WKUF member in charge of event _____

Phone _____

Others helping:	Name	Phone	Times
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Date confirmed event with contact: _____ via: email phone