



**HUSTON-TILLOTSON UNIVERSITY CAMPUS ACTIVITY/EVENT  
REQUEST FORM  
(FOR EVENTS WITH CATERING AND SET UP)**

Campus Location: Choose an item. \_\_\_\_\_ Other: \_\_\_\_\_  
 Event Sponsor: \_\_\_\_\_ Number of attendees \_\_\_\_\_ (Do not leave blank)  
 Contact Person(s): \_\_\_\_\_ Email: \_\_\_\_\_  
 Phone (Mobile): \_\_\_\_\_ Office: \_\_\_\_\_ Home: \_\_\_\_\_  
 Name of Event/Activity: \_\_\_\_\_  
 Description/Purpose of Activity/Event: \_\_\_\_\_  
 Date of Activity/Event: [Click here to enter a date.](#) Event Set Up Time: \_\_\_\_\_ Event Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

**Signatures:**  
 Director of Campus Safety: \_\_\_\_\_ Date: \_\_\_\_\_  
 Coordinator of Campus Life: \_\_\_\_\_ Campus Advisor \_\_\_\_\_  
 Requestor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Athletic Director (Gymnasium/Athletic Field Use Only) \_\_\_\_\_ Date: \_\_\_\_\_

**Food Service:** (Catering by Ala Carte Menu Services, Inc.)  
 Catering needed: Choose an item. (If yes, please call 512.505.3150 to make catering arrangements.)  
 Linen: Choose an item. (If yes, number needed \_\_\_\_\_ (Linen is provided at an extra charge through catering only)  
 Catering Description \_\_\_\_\_

**Technology Services:** (Sound technician is required for King-Seabrook Chapel. Charges apply.)  
 Computer: Choose an item.  
 House Projector: Choose an item. (Requires access to the remote control provided by the University)  
 Laptop: Event sponsor is responsible for providing their own laptop. MAC users are responsible for adapters.

**Media Services:** (Services for HT personnel only and secured through HT)  
 Choose an item. (If yes, please continue) Number of Microphones: \_\_\_\_\_  
 Other equipment needed: \_\_\_\_\_ A/V Scheduled: Choose an item.  
 Additional Item: Piano: Choose an item. (King-Seabrook Chapel Only)  
 \_\_\_\_\_

**Auditoriums Only**

Computer: Choose an item.  
 House Projector: Choose an item.  
 Podium with Microphone: Choose an item.  
 Auditoriums can only accommodate one additional microphone from the podium. If yes, technician required from the ID Department. Call 512.505.3168.

**Facilities:** (Set ups will only occur when a diagram is submitted with this request)  
 Tables and number needed:  Round/10 ft. \_\_\_\_\_  Round/8 ft. \_\_\_\_\_  6 ft. \_\_\_\_\_  8 ft. \_\_\_\_\_  
 Chairs: Choose an item. If yes, number needed:  Padded \_\_\_\_\_  Unpadded \_\_\_\_\_  
 Housekeeping: Choose an item. (Required for some events at additional charge)  
 Catering Tables:  Buffet (Four – 8 ft. tables)  Reception (Two – 8 ft. tables)  Other \_\_\_\_\_

**Additional Services or Equipment Required:** \_\_\_\_\_  
**Description of Special Needs:** \_\_\_\_\_

This is a request to reserve available resources and is not a binding agreement. Please submit your deposit with this request in order to secure your reservation. Make checks payable to Huston-Tillotson University or pay online at [www.htu.edu](http://www.htu.edu). To review procedures and download forms, view Facility Reservations at [www.htu.edu](http://www.htu.edu). To check availability of a date or facility, contact Community Outreach at [events@htu.edu](mailto:events@htu.edu) or 512.505.3006. Final decisions will be made in writing. 2018-3



**HUSTON-TILLOTSON UNIVERSITY ACTIVITY/EVENT  
COMMUNITY OUTREACH FORM  
(FOR ON- AND OFF-CAMPUS ACTIVITIES/EVENTS)**

**This form to be completed at the conclusion of each activity/event.**

Date of Activity/Event: \_\_\_\_\_

Name of Activity/Event: \_\_\_\_\_

Location of Activity/Event: \_\_\_\_\_

Contact Person(s): \_\_\_\_\_ Email: \_\_\_\_\_

Phone (Office): \_\_\_\_\_ Cell: \_\_\_\_\_

HT Class/Organization/Entity \_\_\_\_\_

HT Faculty/Staff/Contact Person(s): \_\_\_\_\_

Email: \_\_\_\_\_

Phone (Office): \_\_\_\_\_ Cell: \_\_\_\_\_

Activity/Event Type: \_\_\_ Internship \_\_\_ Volunteer Assignment \_\_\_ Community Service \_\_\_ Other \_\_\_\_\_

Number Participants: \_\_\_ HT Students \_\_\_ HT Faculty \_\_\_ HT Staff/Administration \_\_\_ Community

Reoccurring Event: \_\_\_ Yes \_\_\_ No      Outreach Total Hours: \_\_\_\_\_

**Student Learning Outcomes:**

Return form to:

Huston-Tillotson University | Center for Civic Engagement and Community Outreach | Attn: Linda Y. Jackson  
Sandra Joy Anderson Community Health and Wellness Center | Office 106 | 900 Chicon Street | Austin, TX 78702

[lyjackson@htu.edu](mailto:lyjackson@htu.edu) | 512.505.3006 p | 512.505.3190 f