

RESERVATION REQUEST FORM

Robert Morris University
6001 University Boulevard, Moon Township, PA 15108-1189
Conference and Facility Services (412) 262-8407

This is a request for facilities and not to serve as a confirmation of reservation.

Requested by: _____ Title: _____

Organization/Department Name: _____ Dept #: _____

(Please select one)

RMU Event/Meeting External Organization RMU Sponsored Event/Meeting

Phone _____ Cell: _____ Email: _____ FAX: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

Title of Event: _____ Estimated Attendance: _____

Date(s) of Event: _____ Start Time: _____ End Time: _____

Location Requested: _____ Setup Time: _____ Tear Down Time: _____

Room Seating Style:

- Set Up to Follow
- Banquet
- Classroom
- Conference
- Crescent Round
- Reception
- Semi-Circle
- Square
- Theater
- U-Shape

Furnishing:

- Chairs _____
- Coat rack
- Easel
- Flip Chart
- Marker Board
- Sign Stand
- Table Skirts
- Stage
- Tables
Round _____
6' Ft _____
8 Ft _____
- Cocktail _____
- White Board
- Other

Audio-Visual:

- A/V cart
- Computer/Laptop
- Conference Telephone
- DVD/Cassette
- LCD projector
- Microphone
Type: _____
- Podium
- Overhead Projector
- Screen
- TV Monitor
- VCR
- Other _____

Catering:

- Breakfast
- Brunch
- Lunch
- Dinner
- Other
- N/A

All food service must be provided by Parkhurst Dining Service. Please complete billing information above if food is being charged to an external group.

Marquee/Parking Signage:

- no
- yes Message _____

Notes:

Submission of this request does not guarantee space availability. An event manager will contact you for confirmation of this electronic request.