



SNACK MACHINE REQUEST FORM

Club Name: _____

Club President's Information

Name: _____

Liberty Email: _____

Phone Number: _____

Club Faculty Advisor's Information

Name: _____

Liberty Email: _____

Name of Event: _____

Event Date: _____

Snack Machine Request For:

Popcorn Machine

Cotton Candy Machine

Snowcone Machine

Event Description:

Pick-up Time and Date: _____

Return Time and Date: _____

Contact information of individual picking up the machine

Name: _____

Liberty Email: _____

Phone Number: _____

Signature:

Club President

Date