

FACILITY RESERVATION INQUIRY FORM

Montview Bowling Alley (MVBA)

All information must be entered to ensure timely scheduling!

Con	tact	Info	orm	ation
OUL	LUCE		<i>-</i> 1111	auvii

1.	Please provide the following Point of Contact (POC) information:
	Name:
	Cell Phone Number:
	Email Address:
	Legal Address:
	LUID (if current or previous LU Student/Faculty/Staff):
Int	ernal LU Organizations (ONLY)
2.	If your requested event is for an official Liberty University organization / department / group, please select the organization below and list its name:
	LU Academics:
	LU Athletics:
	LU Club Sports:
	LU Department:
	*LU Residence Hall:
	*Please list Resident Director Name, Email Address, and Phone Number:
	*LU SGA Club:
	*Please list SGA Club Faculty Advisor Name, Email Address, and Phone Number:
Ex	ternal Customers & Organizations (ONLY)
3.	Please select your affiliation with Liberty University:
	Current Student/Faculty/Staff General Public/Alumni
4.	Is the requested event is for personal use or for an external organization?
	Personal Use External Organization

5. _	If the requested event is for an <u>external organization</u> , please list your legal business name <u>and</u> address.
C	eneral Reservation Information
	Please indicate how many Montview Bowling Alley (MVBA) lanes you would like to reserve with
0.	the minimum being two lanes and the maximum being six lanes (please note that each lane can accommodate up to six bowlers).
7.	Please provide the name / title of the requested event:
8.	Please provide a description of the requested event including purpose, theme, and activities involved.
9.	Please list all equipment, decorations, games, crafts, etc. that you are requesting to bring to the facility for the event.
10	. Please indicate if the requested event is private or open to the public:
	Private Event Public Event
11	. Please list the preferred reservation date(s) and two backup dates.
_	

12.	. Please list the proposed timeline for the event:
	Set-Up Start Time:
	Event Start Time:
	Event End Time:
	Tear-Down End Time:
13.	. Who <u>and</u> how many people are anticipated to attend the event?
14.	. How many adults will be in attendance (18 years of age and over)? How many minors will be in attendance (under 18 years of age)?
15.	. Will there be food at this requested event? Yes No If yes, will it be:
	Brought to campus by someone in your party.
	Delivered to campus by food company, please list the company name:
	Catered/served on-site by company, please list the company name:
16.	. Will you be hiring any external vendors for the requested event (i.e., Food truck, DJ, caterer, photographer)? If yes, please list the type of vendor and business name below. Yes No
_ 17.	. Will the requested event be ticketed and have a guest admission fee? If yes, how will you be handling ticketing? Yes No

will you be ha	andling registration? Yes	No	
-	ested event or activi le more information	ty have anything to do with fundraising or don	ations? If yes,
-			ations? If yes,

Montview Bowling Alley (MVBA) Resources

20. Please indicate which of our available resources you would like to request for the event:

Ball Ramps

Bumpers on Lanes (for kids 10 years of age and under or special purposes)

Please note that tables and chairs are available on a first come first served basis!