

## **FACILITY RESERVATION INQUIRY FORM**

## **Liberty Mountain Snowflex Centre**

All information must be entered to ensure timely scheduling!

Contact	Information
Contact	Intormation

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.	<ol> <li>If your requested event is for an official Liberty University organization / department / group, please select the organization below and list its name:</li> </ol>			
	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.			
Ge	eneral Reservation Information			
6.	Please provide the specific location(s) and/or activities at the Liberty Mountain Snowflex Centre that you are requesting to reserve, as listed on our <u>Campus Recreation Facility Reservations webpage</u> .			
7.	lease provide the name / title of the requested event:			
8.	Please provide a description of the requested event including purpose, theme, and activities involved. If requesting to reserve facility space, please indicate if anyone in your party plans to participate in slope activities during the reservation.			
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:				
11	Private Event Public Event  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 and how many people are anticipated to attend the event?	
14. How many adults will be in attendance (18 years of age and over)? H attendance (under 18 years of age)?	low many minors will be in
15. Will there be food at this requested event?  Yes  If yes, will it be:	No
Brought to campus by someone in your party.	
Delivered to campus by food company, please list the comp	pany name:
	_
Catered/served on-site by company, please list the compan	y name:
16. Will you be hiring any external vendors for the requested event (i.e., F photographer)? If yes, please list the type of vendor and business name of the ve	
17. Will the requested event be ticketed and have a guest admission fee? be handling ticketing?  Yes  No	If yes, how will you

18.	. will the requested event require reg will you be handling registration?	gistration and is there a ree associated? If yes, now	
	Yes	No	
19.	. Will the requested event or activity has please provide more information.	have anything to do with fundraising or donations? If yes,	
	Yes	No	

## **Liberty Mountain Snowflex Centre Resources**

20. Please indicate which of our resources you would like to request for the event *(only available for Half Upper Lodge or Full Upper Lodge reservations)*:

8ft Rectangular Tables (for your expected head count)

6ft Round Tables (for your expected head count)

Metal Folding Chairs (for your expected head count)

**Podium** 

Speaker Access with Bluetooth Connector

Microphone & Stand

Monitor Screen & HDMI Cord