

**New Orleans Baptist Theological Seminary
Facilities Department
Event Assistance Request Form**

1. **ALL EVENTS MUST BE REGISTERED WITH THE CAMPUS CALENDAR PRIOR TO SUBMITTING THIS FORM.** Contact Brianna Oakley at ext. 8022 or email campuscalendar@nobts.edu.
2. Complete and return this form to the Facilities Department located at 4600 Providence Place at least 10 business days prior to the event, but no more the 90 days before the event. This form may be faxed to [251-257-1817](tel:251-257-1817) or emailed to fixit@nobts.edu.
3. Please direct any questions to Andrea Legendre at ext. 8213 in the Facilities Department.

EVENT INFORMATION

Event Name: _____

Date(s) of Event: _____

Beginning time of event: _____

Ending time of event: _____

Location of event: _____
(Please be specific - include building name and room number)

Expected attendance: _____

Description of event: _____

Sponsoring Organization: _____

Contact Person (fullname): _____

Campus local phone #: _____

Cell phone#: _____

Emergency contact #: _____

Email address: _____

Account #: _____
(To be used only if unusual costs are incurred.)

Facilities Set-Up

A/C Needed: _____

Table setup and placement by: _____

Number of items needed:

Tables: _____ Chairs: _____

Garbage Receptacles: _____

Description/drawing of set-up: _____

By submitting this form, the sponsoring organization/department assumes responsibility to insure that those in attendance comply with all seminary policies.

Signed: _____ Date: _____

OFFICE USE ONLY

Event Approved? _____ yes _____ no

Approval granted by: _____

Additional signatures required: _____ yes _____ no

Assoc. VP or Facilities _____

Copies to HVAC and Janitorial Supervisor