



Event Services Request Form

Dallas Theological Seminary • Event Services • 3909 Swiss Ave. • Dallas, Texas 75204 • 214.887.5160 • 214.887.5161 • Fax: 214.887.5517

EVENT SERVICES USE ONLY

Date Received _____ Facility Book CARS # _____
 Director of Facility Coordinator Approval _____ Facility Setup Approval _____
 Campus Police Applicant Event Services _____
 Student Life Media Support Catering _____
 Other Parking Reservation _____ Custodial Services _____
 Event Services Coordinator Approval _____ Project _____

Please see Event Services Procedures for DTS and non-DTS Groups at www.dts.edu/eventservices for information on how to use this form.

RESERVATION INFORMATION

Activity Name _____ Number Attending _____

Location Requested _____ Times: Start _____ End _____
Building Requested/Room # Building must be vacated by 9:30 PM

Activity Date(s) ____/____/____ Day(s) of the Week _____

Set up completed by _____ (AM/PM) on _____ Will you be decorating? If so, when? _____

Applicant: _____
Name Dept. Name 10 Digit Account #

Email Box/Address Phone # or Ext ID #

By signing below I acknowledge I have read the Event Services Procedures for DTS or Non-DTS Groups and agree to the terms included.

Faculty Advisor: _____
Faculty Advisor's Signature Print Faculty Advisor's Name

Event Budget: \$ _____ Budget Mgr/Dept Head: _____
Signature Print Name

Room Arrangement #: _____ (attach room diagram OR see www.dts.edu/eventservices)
 Podium Lectern *Note: All set ups must be approved & completed by the Event Services Team*

Further description if necessary: _____

For help, call Event Services @ x5160 or x5161.

PARKING Reserve _____ Parking Spaces (pending approval) Lot: E4 NI
Note: Minimum of 20 spaces required for parking reservation

STUDENT LIFE APPROVAL _____ Date _____

MEDIA SUPPORT Data Projector PA System Comments _____
 Media Support Approval _____ Date _____

MEDIA PRODUCTION Audio Video Purpose of Recording _____
 Media Production Approval _____ Date _____

Note: Any type of media support (x5349) or media production (x5341) requires approval prior to submitting ESR to Event Services

Will there be food at this event? NO If not, you're done! Submit this page to eventservices@dts.edu
 YES Continue to 2nd page

PLACE SETTINGS (Indicate quantities)

_____ Styrofoam cups _____ 12 oz Plastic cups _____ Plastic Plates _____ Styrofoam Plates
 8 oz 12 oz 6" 9" 6" 9"

_____ Dinner Napkins _____ Beverage Napkins _____ Clear Plastic Ware _____ White Plastic Ware

CATERING EQUIPMENT (Indicate quantities)

_____ Coffee condiments (cream/sugar/stir sticks) _____ Ice bucket w/scoop
_____ 55-cup Coffee Urn _____ Water Bottles
_____ 12- cup Coffee Shuttles _____ Assorted Sodas
_____ Hot Water Urn _____ Cambro Drink Dispenser
_____ Hot tea selection _____ Glass Drink Dispenser (if available)
_____ Plastic Pitcher

LINENS Table Cloths (white) (Indicate quantities)

_____ Rectangle _____ Square

DTS CATERING FOOD & BEVERAGE SELECTIONS (Please indicate what you would like for food/drink and quantity)

NON-DTS CATERER INFORMATION (Must be approved by Events Services prior to ordering)

Caterers must provide for all catering needs associated with the event. Catering/Group must provide current certificate of insurance with liability, auto, and workman's comp prior to the event.

Name of Catering Company _____ Phone _____

Contact Person _____ Date & Time of Delivery _____

Menu Selection _____