

Toyon Hall Lounge & Room Use Application

The Toyon Staff considers applications at meetings, typically held on Sunday at 9pm. Please submit this form to toyonreservations@gmail.com and remember that **absolutely no alcohol is allowed** in any of the rooms that are reservable through this form. If your application is submitted less than a week before the event, it is unlikely to succeed, and you may not even get a response.

Event Date(s): _____ Sponsoring Organization: _____

Event Time: _____ Total Time (Setup to Cleanup) in Room: _____

Indicate room(s) requested: Main Lounge Sky Lounge Lobby Moose Room Meg Pitts

What sort of set-up will be required? (make sure "Total Time" above includes this time):

Contact's Name and Position: _____ Email: _____

Cell Phone: _____ Toyon Affiliation, if any: _____

ASSU, PTA, or SUID Student Account Number (No checks or cash accepted): _____

Event Description (include relevance to Toyon residents): _____

Expected attendance number: _____ Admission charge? \$ _____ **

(** We expect Toyon residents to be invited to attend all Lounge events free of charge.)

If food or beverage will be served, please describe what, where, when? _____

Will the noise level of the event exceed that of normal conversation/moderate activity? Y N

Who is the target audience? How/where will the event be publicized? _____

Please describe any furniture/equipment needed (or need for removal of furniture) for the event:

We/I, the undersigned, agree to hold this event in a manner respectful to Toyon residents and follow the guidelines set forth in the *Toyon Hall Lounge/Room Use Expectations*. We understand that charges may be incurred to the above listed account should violations of the University Residence Agreement occur. We/I give permission to charge the amount necessary to cover damages or violations incurred during the event and understand that such charges will be the financial responsibility of the sponsoring organization or student, and will be billed to the primary contact person and/or the account number provided. We waive any and all claims against Stanford University for injuries to persons or damages to property arising in any way from our use of the Toyon Hall facilities.

Signature: _____ Printed Name: _____

Date: _____ SUID# _____ Student Account, PTA or ASSU# _____