

Paul Robeson Campus Center Request Form Office of Reservations and Special Events

350 Martin Luther King Jr Blvd., RM 203 Newark, NJ 07102

Phone (973)353-5568 | Fax (973) 353-5912 | Email <u>resv@newark.rutgers.edu</u>

Prior to submitting this form, you must receive approval from Bryant Lebron, Administrative Assistant of Paul Robeson Galleries at blebron@newark.rutgers.edu.

Client/Department:	Con	ntact Name:			
Phone:	E	Email:			
Event Title:	Ev	vent Date(s):			
Reservation Time (including setup & bre	akdown time):	Event Time (if different):			
Estimated Attendance: % of F	Rutgers Affiliated Gues	sts:Requ	nested Room(s):		
Brief Event Description:					
Timeline of Activities Planned During Ev	ent (please attach ager	nda if relevant):			

Yes No Working with any extern Please specify: Caterers & C		☐ Yes ☐ No	Will alcohol be served or sold?		
☐ Yes ☐ No Will services and/or mero		□Yes □No	Will the event be advertised off cam	inus?	
Yes ☐ No Is the event open to the public?		☐Yes ☐ No	Will admissions or donations be coll	_	
☐ Yes ☐ No Is media expected to be a		☐ Yes ☐ No	Will tickets be sold at the door?	ioctcu.	
	•	_	ng (x5997) is the exclusive caterer in P	PRCC	
Please list any speakers who are not Rutg				Rec	
	,018 800000108, 1000109	- Starr W-19y S-	www.am.g vac o veaso		
Please list any special VIPs who may be a	ttending the event:				
Set-Up Type (please select one): Theate	-	-		ference	
☐ Hollow Square ☐ Empty	Room Reception	n ∏Fair	☐Closed Conference Square		
General Equipment & A/V Equipment N	eeded (insert quantity)	<u>):</u>			
For prices, visit our website <u>www.robeson.rutgers.edu/prc</u>					
6' x 30" Rectangular TableEasel			Portable Sound System		
6' x 18" Rectangular Table	Stage Pieces [6'	x 8' per piece]	Wired Mic		
5' Round Table [seats 8]	Dance Floor 18	' x 18'	Wireless Mic/Lavalier		
Bistro Table	Dance Floor 21	' x 21'	Podium		
Chairs	Coat Rack				

	ical needs or a suggested layout. Please be aware that additional equipment not lis utside company. For details or guidance, please contact the Reservations Office.	ted
Additional Nation		
Additional Notes:		
As an authorized representative of	, I certify to the best of my knowledge t Client/Department/Organization	hat
the information provided above is accura	ate and I accept responsibility for the conduct of the group using the facilities, the	eir
compliance with time and purpose speci	fied above, any and all charges incurred, and guarantee Rutgers University again	nst
	, its replacement or repair as necessary. I agree to restore the space to an order	•
	nd understood the policy statements on <u>robeson.rutgers.edu/office-of-reservation-a</u>	
	by all applicable policies of Rutgers University and NJ State laws and regulation	
	t a confirmation, and should not advertise this event until receipt of a confirmat	ion
document.		
Name (Please Print)	Signature	