

APK Rental Inquiry

Event Name _____

Type of Event (*check all that apply*):

- Public Private Ticketed TV/Radio Public Broadcast
 Meeting/Training/Workshop A/V Presentation/Lecture
 Reception Art Activity Wi-Fi Use Theatric Production
 Other _____

Area(s) Requested with Date(s) Listed:

- Atrium _____
 Lecture Hall _____
 Classroom _____
 Museum Exclusive Viewing _____

Event Start and End Times _____

Set-up time begins _____ Clean-up time ends _____

Number of People Expected to Attend _____

Event Will Include (*check all that apply*):

- Caterer Alcohol Music Parking Garage

Additional Notes or Special Requests:

Renter _____

Contact Name _____

Contact Email _____

Contact Phone _____

Date Inquiry Form Submitted _____