DSU Art Gallery Reservation Form

Event Contact Person: _______________________________ Phone Number ______________________

Email: _______________________________

Event Title: ___________________________________________________________________________

Event Description: _____________________________________________________________________

_____________________________________________________________________________________

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Daily events – provide completed form to Provost office no less than one month prior to set up.

Extended Exhibitions – provide completed form to Provost office a semester prior to exhibition.

Date(s) of Event: ___________________________________

Set up date: _________________________________ Take down date: _________________________

Expected number of guests: _______

Details of events (for external purposes only):

___  Locked   ___  Serving food
___  Podium    ___  Audio equipment
___  Wall hangers   ___  Other needs – explain below

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Email form to Susan.Slaughter@dsu.edu, Provost Office.

All confirmed reservations will be posted on the Art Gallery website calendar.