RATCLIFFE HICKS ARENA EVENT APPROVAL FORM

Contact Information:

Name of Person in Charge (must be present at all times): _________________________________

Cell Phone: ____________________ KFS#: ____________________(only to be charged if cleaning required)

Sponsoring Faculty Member: _________________________________

Department: ____________________ Office Phone No.: ____________________

Event Information:

Description of Event: _________________________________________________________________

Estimated Participants: ____________

Reservation Details

<table>
<thead>
<tr>
<th>Event Setup</th>
<th>Date</th>
<th>Time</th>
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<td>Event Begins</td>
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<td>Event Ends</td>
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<td>Event Cleanup &amp; Breakdown</td>
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When reserving the Ratcliffe Hicks Arena it is your responsibility to set-up before and clean-up after the event. Failure to clean the arena after your event will result in your department/student group being charged for maintenance costs and the possibility of not being allowed to reserve the arena in the future. If you have special needs/requests, you must contact the individual(s) or department(s) listed below. Many of the services require advance notice. The Office of Academic Programs (OAP) only schedules the Arena; we do not provide any services for the events. You may check availability of the Arena by emailing Vickie.Reiser@uconn.edu. This form must be completed and returned to OAP, W. B. Young Room 206, Unit 4090, Attn: Vickie.

1. To obtain fresh sawdust – Mary_Margaret.Cole@uconn.edu
2. Custodial/Building Services – Patricia Guay-Richards @ 860-933-5824
3. Classroom reservations - Scheduling @ 486-3329
4. Opening of classrooms/building- Locksmith Services @ 486-2921 (Amy Reiman)
5. For table/chair/poster board reservations you can go to the Central Stores website.

I have read and agree to the terms above:

_________________________________________ __________________________
Signature of Responsible Person for the Event Date Signed

_________________________________________ __________________________
Signature of Sponsoring Faculty Member Date Signed

_________________________________________ __________________________
Department Head Signature Date Signed