

After Hours/Weekend Conference Room Reservation Agreement Form

- > Complete form and send as an attachment to brian.doles@ien.gatech.edu
- > For questions or visitation inquiry, please contact Brain Doles at 470.381.8836
- > If you are submitting a check or cash deposit, please provide form and deposit at time of initial site visit.

GT Department / Group Name

Name Phone email

Deposit Method:

PeopleSoft Project Number Doc ID

\$250 Deposit Required for Student Organizations (make checks payable to Georgia Institute of Technology)

Cash Check

Date(s) Requested Room Number(s)

Time(s) Requested Estimated Attendees

*Set-up Style Requested Theater Banquet Classroom U Shape

I have read the Institute for Electronics and Nanotechnology Conference Room Policies and Procedures and agree to comply with these requirements.

Print Name Signature and Date

*Service Requested IEN Attendant (optional) Facilities Setup/Reset (optional)
Security (optional) Custodial (mandatory on weekends)

* All service fees require four-hour minimum charge and are subject to change

Notes: