

## Standing Meetings University Center, Alumni Center, NET

918-458-2122; fax 918-456-2308

Responsible Contact Person Making Res	ervation			
Position in Organization	Pl	Phone E-Mail		
Address	E-N			
Day of the Week	Beginning Time			
How often will you meet?	Estimated	Estimated Attendance		
Type of Meeting				
Date of First Meeting (Space reservation)	Date of last meeting tions must be renewed			
Room Requested: 1st Choice	2 <sup>nd</sup> Choice	3 <sup>rd</sup> Choice		
Faculty Advisor (for student organization	ns only)			
for special events or emergencie  Recognized student organization space free of charge to conduct additional events in the UC each Space is considered "as is" and Responsible groups will be billed.  I have read and understand the policies a agree, on behalf of the group I represent,	ns in good standing with the regular business of their of the semester.  Students are expected to lead for damages or extraical and guidelines regarding up to abide by them:	organization and two eave the meeting sp ean-up. se of the University	o free special, pace as they found it.	
Signature of Contact Person				
For Office Use Only: Date Received	Date Respo	onded	Initials	
Room Assigned				
Day	Time	Frequency		

Organization\_\_\_\_\_\_ Application Date\_\_\_\_\_