

College of Charleston Faculty Club

Request for Room Reservations:

E-Mail: FacultyClub@CofC.edu

Day / Date of event: _____

Time of event: _____ # Attending event: _____

Specific purpose of event: _____

Name of department: _____

Sponsoring host's name: _____ Phone #: _____

Reserved by: _____ Phone # _____ Fax #: _____

E-mail address: _____

Refreshments / Food to be served – Yes or No; if yes, will alcohol be served? _____

Will students be attending this event? Y or No; if alcohol served, responsible person for checking age requirement will be: Name/Cell #: _____

Will 20 Glebe Courtyard be requested for this event? _____

College person in charge & attending event: _____

Caterer name / Address/Phone #: _____

Catering Manager in charge / Cell Phone #: _____

Caterer set up / Break down time required: _____

All equipment not currently at 20 Glebe must be ordered by client if needed, including but not exclusively tables, chairs, podium or speaker system, etc.

Any labor charges incurred outside of normal working hours are the sole responsibility of the client or department.

Cancellation of events should always have a 48 hour notice.

You will be notified of the confirmation status within three working days. Please retain a copy of the confirmation for your records.

Confirmed by: _____ Date: _____