

Facilities & Business Services
Special Events items Request/Agreement

Notes: Please email this form 48 hours or more before your event
You will be notified via phone or email if the request cannot be filled.

Organization Name: _____ Event Description: _____

Person of Contact: _____ Phone Number or Email: _____

Event Date: _____ Event Time: _____ Delivery Date: _____ Delivery Time: _____

Pick Up Date: _____ Pick Up Time: _____ Location of Event: _____

Please choose all that apply:

Pick Up: _____ Set-Up: _____ Porter: _____ (# of Porters Needed: _____)

Items Available

Amount Requesting

Tables (8 foot) _____

Folding Chairs _____

44 Gallon Trash Cans _____

Recycling bins _____

Is there a specific layout need? YES NO If yes, please attach.

Comments/Special Instructions: _____

Expected Attendance: _____

Signature of Requestor

Please sign and send to Facilities facilities@tnitech.edu / TTU Box 5041

Date