

DIVISION OF BUSINESS & FINANCE

Request for Facilities Use

Fed Tax ID:				PERMIT #: E			
Name of Organization:			Contact Person:				
Address:				Tel No:			
				Alt No:			
			Fax No:				
E-Mail Address	:						
Corp Status: Non-profitProfit				Estimated Attendance:			
Purpose of Eve	ent:						
	uested:						
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Date			,	,	,		
Access Tir	me						
Rehearsal T	īme						
Show							
Start Ti	me						
End Tin	ne						
Attach addition	al forms if more da	tes requested.	•		-	÷	
We are request	ting: Total # of Da	ays	_, Total # of Ho	ours	_		
Schedule of Ad	mission/Charges:	Will tickets be	sold at the gat	te? Yes No_	Sale of m	erchandise	Yes No
General Public \$, Old Westbury Students \$_				Other \$			
Mode(s) of Trai	nsportation (# of ea	ach): Auto	Bus	_ Other	_		
Parking Facilitie	es Needed: Campu	us Center:	Clark Cente	er,Acade	mic Village: _	Science	e Building:
Equipment Needs (Specify): Audio Visual Needs (Specify):							
Other Needs Indicate related	l activities associat	ed with Facilitie	es Use (e.g. M	usic, Refreshme	ent /Catering,	Promotional	Activities, etc):
 Revie Signe Certii certif Certii 	icate of workers' co ficate of Incorporat eposits and payme Business Cor SUNY Colleg P.O. Box 210 Old Westbury	f all publicity an ttee and notary surance , 1Millic ompensation in tion(If applicab nts mpliance Office e at Old Westb	d posting of sig public nn / 3 Million st surance and d le) ury	gns ating SUNY Col isability.	-		ry's facilities

Phone: 516.876.3483 / 516.876.3905 Fax: 516.876.4972

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