



OSU URBAN ARTS SPACE 50 W. Town St, Columbus OH 43215 · phone (614) 292-8861 · fax (614) 688-3446
External Request for Event Form

Date Submitted : _____

Name: _____

Title: _____ Organization: _____

Address: _____
street city state zip code

Phone: _____ Fax: _____ Email: _____

My organization is (check one):

- FP Government
 NPO Other: _____

Event Name: _____

Brief Description: _____

Starting Date: _____ Starting Time: _____ Anticipated Number of Participants: _____

Ending Date: _____ Ending Time: _____ Contact for Event: _____

Participating Departments: _____

Special Needs (e.g. tables, chairs, technology) _____

Space Requested (Check all that apply):

- Upper Gallery Conference Space
 Lower Gallery Kitchen

Do you want to serve alcohol at your event?

Yes No

Do you want to exhibit anything in conjunction with your event?

Yes No

The OSU UAS has a list of approved caterers that can be used in the facility. Please check this box if you would like to receive information about these options.

Requested by (signature and date): _____

**Please fax completed forms to (614) 688-3446.
 Upon receipt of your form, you will be contacted for discussion of rental fees.**

For Office Use Only

Date Received: _____ Received by: _____ Reply to requestor: _____