

## Reservation Request Form for Use of the Hefter Conference Center

Title of Event: \_\_\_\_\_

Date(s) Requested: \_\_\_\_\_ Anticipated Attendance: \_\_\_\_\_

Times of Event: From \_\_\_\_\_ AM / PM To \_\_\_\_\_ AM / PM Open Building at: \_\_\_\_\_ AM / PM

UWM Department: \_\_\_\_\_ Primary Contact: \_\_\_\_\_

Contact's Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

### Food & Beverage Service

If food or beverages are to be served, please indicate the appropriate information below. The department should make all food and beverage arrangements directly with the respective approved caterer. Departments and individuals may not bring in their own food or beverages.

\_\_\_ UWM Union Dining Services  
\_\_\_ Breakfast \_\_\_ Morning Break \_\_\_ Lunch \_\_\_ Afternoon Break \_\_\_ Dinner \_\_\_ Reception

\_\_\_ Bar/Alcoholic Beverages \_\_\_ Other \_\_\_\_\_

\_\_\_ External Caterer Approved by UWM Purchasing

Name of external caterer: \_\_\_\_\_

\_\_\_ Breakfast \_\_\_ Morning Break \_\_\_ Lunch \_\_\_ Afternoon Break \_\_\_ Dinner \_\_\_ Reception

\_\_\_ Other \_\_\_\_\_

Certificate of Insurance

\_\_\_ Has been submitted to Risk Management \_\_\_ Will be submitted 5 business days prior to event

\_\_\_ Hefter Conference Center

\_\_\_ Coffee @ \$1.50 per person. Ready at \_\_\_\_\_ AM / PM Clean up at \_\_\_\_\_ AM / PM

\_\_\_ Soft Drinks @ \$1.50 per person. Ready at \_\_\_\_\_ AM / PM Clean up at \_\_\_\_\_ AM / PM

### Audio-Visual Equipment Needed

\_\_\_ Overhead Projector \_\_\_ Slide Projector \_\_\_ VCR & TV Monitor \_\_\_ Flip Chart \_\_\_ Portable Blackboard

\_\_\_ Podium with Microphone \_\_\_ Podium without Microphone \_\_\_ CD Player

\_\_\_ Other (additional charges will apply) \_\_\_\_\_

**Description of Room Set-Ups**

Entrance Hall =

Living Room =

Solarium =

Dining Room =

Billiard Room =

Library =

**Authorization for Direct Charge Billing Form** (necessary to confirm reservation)

\_\_\_ Is attached to this request \_\_\_ Will be submitted at least 14 days in advance

**Approvals**

I have read and understand the Hefter Conference Center *Description, Policies and Guidelines*, and confirm that the above event is official University business. I am authorized to sign for my department. My department assumes responsibility for all costs for any damage or loss to premises, building, or contents; and loss or damage of others' property; and injury or death to person(s) caused by or arising out of the department's activities in or occupancy of the Hefter Conference Center.

Department Primary Contact \_\_\_\_\_ Date: \_\_\_\_\_  
(Required)

Dean or Division Head \_\_\_\_\_ Date: \_\_\_\_\_  
(Required)

Please return this form to the **Conference Services Office, UWM School of Continuing Education, 161 W. Wisconsin Ave., Suite 6000, Milwaukee, WI 53203; or Fax to 227-3192.** For additional information call 227-3195. Reservations will be confirmed upon receipt of this form with appropriate signatures and an Authorization for Direct Charge Billing Form.

Thank you for choosing the Edith S. Hefter Conference Center for your event.