

Conference & Event Services Summer 2023 Housing Request



Dates of Event

Event or Camp Name

Name of Organization

Name of Contact Person

Title

Primary Contact Number

Campus Number (If Applicable)

Email Address

Type of Event and Details

Continued

Guest Information:

Day and Time of Check-In

Day and Time of Check-Out

Age of Participants: _____

Number of Staff: _____

Males

Females

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Total Number

Number of Single Rooms: _____

Double Rooms: _____

If any special needs, please explain: _____

Applicant Signature

Date

Applicant Name (Print)

BOWIE STATE UNIVERSITY RESERVES THE RIGHT TO IMMEDIATELY TERMINATE THE PRIVILEGE OF USE OF FACILITIES OF ANY INDIVIDUAL GROUP AND/OR ORGANIZATION WHO REFUSES TO COMPLY WITH UNIVERSITY RULES & REGULATIONS

FOR OFFICE USE ONLY

CONFERENCE & EVENT SERVICES

DATE