

Table Booking Form 2009–2010 Form A5

www.yorkstudentcentre.com

Please print clearly.

Contact Information

Name _____ Student Group Name _____
 Position in the Student Group _____ Student Group Mailing Address _____
 Mobile Phone _____ Student Group Phone Number _____
 Email _____ Student Group Email _____

Table Booking Information

Date(s) requested _____
 Nature of tabling _____
 Where will the funds be going? _____
 Types of items that will be displayed* _____
 Other Information: _____

* If you wish to book a table at the York University Student Centre for the purpose of organizing a bake sale, please complete and submit a Request for Bake Sale Form instead.

I have read, understand, and agree to comply with all booking conditions listed in the York University Student Centre Booking Agreement 2009-10.

Please note that submitting this form does not guarantee your booking.

Signature _____ Date _____

For office use only

Date Received _____ Received by _____

Booking Details: _____

Date Approved _____ Approved by _____