

**REQUEST FOR USE OF THE DOUDNA FINE ARTS CENTER**

- Conference/Competition Type of Event -  
217/581-8500

**Start:** Day \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Time \_\_\_\_: \_\_\_\_ Anticipated Attendance \_\_\_\_\_

**End:** Day \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Time \_\_\_\_: \_\_\_\_ Event Title: \_\_\_\_\_

Individual Responsible for Event: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

EIU Employee Overseeing Event: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Department/Organization Responsible for Associated Costs: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Support Areas Needed:** Green Room Dressing Room Sound Booth Light Booth Box Office

Other (specify): \_\_\_\_\_

**Personnel That Needs To Be Provided By Doudna Crew:** \_\_\_\_\_ Light Operator \_\_\_\_\_ Sound Operator \_\_\_\_\_

House Manager Ushers Box Office Staff \*If you have requested the use of the box office from the above area you are required to utilize Doudna Staff, the number of which will be determined by the Head of Patron Services.

**Please indicate the activity taking place within venue:** \_\_\_\_\_

**Please attach a detailed list of all equipment/furniture needed.**

**No Request will be processed without a detailed agenda attached.**

► All publication materials relating to this event must refer to the specific location you are requesting to use (i.e. **Doudna Fine Arts Center Lecture Hall, Doudna Fine Arts Center Recital Hall, etc.**) Keep in mind that the Doudna Fine Art Center is open to the public and will not be closed off for any event. Also, any **changes** to an event as booked will be honored at the discretion of the Doudna Fine Arts Center’s Administrative Staff.

*Your signature indicates your acceptance to the Scheduling and Use Policies of the Doudna Fine Arts Center.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Individual Making Request

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Authorizing Official/Fiscal Agent, (Chairman/Dean/Director/Vice-President/President)

*Please complete/correct, sign, date, and return this form to Dennis Malak at the College of Arts & Humanities.*

*This booking is not complete and confirmed until this form has been reviewed and approved.*

*Requests must be made via this form at least 1 month prior to the event.*

**Doudna Fine Arts Center Staff Only**

Date Received: \_\_\_\_\_ By: \_\_\_\_\_ Reply Mailed On: \_\_\_\_\_ On Calendar By: \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Functions Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_ Comments: \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Asst. Dean Programming: \_\_\_\_\_ Date: \_\_\_\_\_ Comments: \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Patron Services: \_\_\_\_\_ Date: \_\_\_\_\_ Comments: \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Contracted Events Manager: \_\_\_\_\_ Date: \_\_\_\_\_ Comments: \_\_\_\_\_