

# Conference Contract Intake Form

Today's Date: \_\_\_\_\_ Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Date(s) of Event: \_\_\_\_\_

Event/ Conference Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Organization: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

# Type of attendees: \_\_\_\_\_ Type of Event: \_\_\_\_\_

Charging to Attend \_\_\_\_\_ MSU or Non-MSU

Space Requested:

ROOM	DATE(S)	TIME	ACTIVITY	SET UP	NOTES

**HOUSING:**

Arrival/Departure Dates: \_\_\_\_\_ # of Rooms (single/ doubles): \_\_\_\_\_

**REMINDERS:**

- Did non- MSU client check off-campus first?
- Chance of remodel interference:
- Catered event must use MSU Catering (x3336)

**NOTES:**

FOLLOW UP DATE: \_\_\_\_\_