

Custodial Event Set-Up Request

Event: _____ Date(s): _____

Location (buildings/rooms) _____

Point Person: _____ Contact # _____

Set-up time: _____ Tear-down time: _____

Event start time: _____ Event end time: _____

Number of people expected: _____ Today's Date: _____

Event Type: _____ Food: _____

(amount)
Items Needed: _____ Trash Cans _____ Signs
 _____ Chairs _____ Barrier Posts
 _____ Tables _____ Extra Supplies in Restrooms

Lock/Unlock building: _____

Set-Up: (draw room set-up)