



# Sales and Solicitation Request Form



Group Name: \_\_\_\_\_

Name of Affiliated Organizations/  
Departments/Student Groups: \_\_\_\_\_

Submission Date: \_\_\_\_\_ Event Date: \_\_\_\_\_

Event Location: Building: \_\_\_\_\_ Room Number: \_\_\_\_\_

Reservation Confirmed?      Yes      No

**Event Type:**

- Bake Sale                       Merchandise Sale                       Ticket Sale                       Promotion Display
- Other – *please specify:* \_\_\_\_\_

**Event Description:**

\_\_\_\_\_  
\_\_\_\_\_

**Permission Request:**

- Conduct Sale                       Sell/Distribute Food                       Distribute Material                       Erect Display
- Other – *please specify:* \_\_\_\_\_

If conducting a sale, indicate total value of items to be sold: \_\_\_\_\_

Who shall benefit financially from these sales? \_\_\_\_\_

If food is involved, Letter from Health Inspector?                      Yes                      No                      N/A

<b>Item(s) Being Sold/Distributed:</b>	<b>Name of Supplier:</b>
1. _____	_____
2. _____	_____
3. _____	_____

**Individual(s) Responsible for the Event:**

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**FOR INTERNAL PURPOSES ONLY**

Solicitation Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**Instructions:**

\_\_\_\_\_

\_\_\_\_\_

Copies to:      Hospitality Services

All sales must be approved through the Solicitations Committee, as per The On Campus Advertising Promotion, Sales, and Solicitation Policy. **THIS FORM MUST BE AT EACH SALE EVENT.** Send to [spevent@uoguelph.ca](mailto:spevent@uoguelph.ca)