



Sales and Solicitation Request Form



Group Name: _____

Name of Affiliated Organizations/
Departments/Student Groups: _____

Submission Date: _____ Event Date: _____

Event Location: Building: _____ Room Number: _____

Is the reservation confirmed? Yes No

Type of Event:

- Bake Sale Merchandise Sale Ticket Sale
- Promotion Display Other - *please specify*: _____

Event Description:

Request Permission To:

- Conduct Sale Sell/Distribute Food Erect Display
- Distribute Material Other - *Please Specify*: _____

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

Who shall benefit financially from these sales: _____

Items Being Sold or Distributed:

Name of Supplier:

- | | |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |

Names of the Individuals Responsible for the Event:

Name	Email	Phone
Name	Email	Phone

If food is involved: Letter from Health Inspector Yes No

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.