

**EXTERNAL AGENCY EVENT BOOKING FORM**  
**TO BE COMPLETED BY THE BOOKING AGENCY**



Group/Organization:			
Contact Name:			
Mailing Address:			
Postal Code		Email:	
Cell Phone:		Work Phone:	
Proposed Date:		# Guests:	
Start time:		End time:	

**Certificate of Insurance**

Company must provide a certificate of general liability insurance in the amount of \$5 million with 'Dalhousie University' listed as an additional insured. They may provide a blanket certificate for the life of their policy, thereby eliminating the need to present proof every time they come on campus.

**Target Audience**

<input type="checkbox"/>	DDS1 (42)	<input type="checkbox"/>	DDS4 (49)
<input type="checkbox"/>	DDS2 (48)	<input type="checkbox"/>	DH1 (30)
<input type="checkbox"/>	DDS3 (47)	<input type="checkbox"/>	DH2 (28)

**Brief Description of Event**

**Ancillary Services**

Ancillary Services are provided by the University and will be coordinated on your behalf - *Fees may be applicable.*

Yes	No		
<input type="checkbox"/>	<input type="checkbox"/>	Will this be a catered event?	Custodial Services
<input type="checkbox"/>	<input type="checkbox"/>	Are there special furniture requirements?	Trucking Services
<input type="checkbox"/>	<input type="checkbox"/>	Is the event being held outside of business hours?	HVAC & Security Services
<input type="checkbox"/>	<input type="checkbox"/>	Will alcohol be served?	Bar Services
<input type="checkbox"/>	<input type="checkbox"/>	Is AV equipment and/or AV support required?	ISCC
<input type="checkbox"/>	<input type="checkbox"/>	Do you require WiFi access? How many accounts? <small>(must have administrative privileges on your device)</small>	Conference Services
<input type="checkbox"/>	<input type="checkbox"/>	Are clinic equipment and/or resources required?	Clinical Services
<input type="checkbox"/>	<input type="checkbox"/>	Will this event be advertised off-campus	Communications
<input type="checkbox"/>	<input type="checkbox"/>	Will there be media present	Communications
<input type="checkbox"/>	<input type="checkbox"/>	Will you be screening a film at this event	Copyright Office

**To be completed by the Faculty of Dentistry**

Suggested rooms: