UVic Outdoor BookingForm

Event Name	
Organizer email _	
Date() and times of	eent:
Brief description of (include any seating, food	ent washroom, electricity needs, and set-up/takedown details):
Desired location(s)	for the event W ~ • • ‰](] • ‰}••] o •
Number of event sta	f: Estimatedimber of attendees:
Review Orders of **Review Wic's Or	urance deails if not UVic staff, aculty, or student he PHO on Cathering and Events here** nmunicable disease and here** nts willequire approval from department leads**
Signature	 Date