

# TREVOR NICHOLS RESEARCH COMPLEX

Reservation Form for the: **Angus J. Howitt IPM Training Room**

**Date (s) Reserved:** \_\_\_\_\_ **Reservation Made by:** \_\_\_\_\_

**Time of Function:** from \_\_\_\_\_ to \_\_\_\_\_

**Billing Address:** \_\_\_\_\_

\_\_\_\_\_

**What form of payment?:** check \_\_\_ JVE \_\_\_ (if JVE, then supply account number)

**Check number** \_\_\_\_\_ **Account number** \_\_\_\_\_

**Phone Number:** (\_\_\_\_) \_\_\_\_\_ **Email address:** \_\_\_\_\_

**Number in Group:** \_\_\_\_\_

**Function:** \_\_\_\_\_

\_\_\_\_\_

**Room Arrangements:** [ ] Tables and Chairs or [ ] Chairs Only

**Refreshments:** [ ] Food and/or [ ] Beverages

**Audio-Visual Equipment Needed:** Slide Projector [ ] LCD projector [ ]

PA System [ ] Podium [ ] Microscope [ ]

**Special Request:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Notes:**

For Office Use only

Confirmed: Yes \_\_\_\_\_ No \_\_\_\_\_ Date Confirmed: \_\_\_\_\_