UNIVERSITY OF MAINE AT AUGUSTA CHARLES DANA DANFORTH GALLERY RESERVATION

DATE OF EVENT: ORGANIZATION RE	QUESTING THE RESERVA	TION:
CONTACT PERSON:		PHONE:
Time: (Begin/End) SET UP REQUESTED	: D:	No. Attending:
MAKING LOGISTIC	_	/ING THE GALLERY IS RESPONSIBLE FOR the reservation form has been approved by sts as follows:
Facilities Management	t: https://webapp.usm.maine	.edu/FMRequests
Technology: techsupp	ort@maine.edu.	
	: Contact Sarah Brightman wi arah.brightman@sodexo.com	ith Sodexo Food Service/Catering at (207) 780-
Access/Security needs	s: Contact Security at 621-34	00.
the Gallery. No art	shall be moved, altered of	onsibility for anything being exhibited in r covered during the event without prior usic needs to be cleared with the Gallery
REFRESHMENTS W	ILL BE SERVED: YES	R SET UP: NO ow and when:
		UMBERS OF AT LEAST TWO (2) PERSONS ble during the entire time you plan to be
SIGNATURE:		DATE:

GALLERY DIRECTO	-	DATE:
cc: Sandra Lam	oreau – Events Coordinat ny – Dean of the College o	tor

Request the forms from Sandra Lamoreau (Administrative Services) Return the completed form to Gallery Director Revised 11/18/19