

## Additional Equipment Request

Sponsoring Organization or Department: \_\_\_\_\_

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Campus Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Confirmed Location: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

	Quantity		Quantity
<input type="checkbox"/> Indoor Table	_____	<input type="checkbox"/> Lectern (without sound)	
<input type="checkbox"/> Outdoor Table	_____	<input type="checkbox"/> Floor lectern	_____
<input type="checkbox"/> TV/VCR	_____	<input type="checkbox"/> Tabletop lectern	_____
<input type="checkbox"/> Flipchart	_____	<input type="checkbox"/> Podium (with sound)	
<input type="checkbox"/> Easel	_____	<input type="checkbox"/> Floor podium	_____
<input type="checkbox"/> Overhead Projector	_____	<input type="checkbox"/> Tabletop podium	_____
<input type="checkbox"/> Slide Projector	_____	<input type="checkbox"/> Microphone	
<input type="checkbox"/> Screen	_____	<input type="checkbox"/> Table Stand	_____
<input type="checkbox"/> Chalkboard	_____	<input type="checkbox"/> Floor Stand	_____

**Policy Acknowledgment**

My signature affirms that I have read, understood, and will abide by Danna Center Services policies as stated on the reservation forms as well as those policies governing student organizations, university events and activities as promulgated in the Loyola University New Orleans Student Handbook.

\_\_\_\_\_  
*Signature*

**Return to Priscilla Williams, Associate Director for Center Services**

Danna Center and Student Activities Office  
 Campus Box 1, 6363 St. Charles Avenue, New Orleans, LA 70118 Telephone: 504-865-3622 Fax: 504-865-3612  
 Email: [dcresv@loyno.edu](mailto:dcresv@loyno.edu) Website: [www.loyno.edu/~dcresv/](http://www.loyno.edu/~dcresv/)