**OKLAHOMA STATE UNIVERSITY - OKLAHOMA CITY (OSU – Oklahoma City)**
**Cowboy Catering and Event Services ● 900 North Portland ● Oklahoma City, OK 73107**
**405-945-3287 or 405-945-3238**

# REQUEST FOR SPONSORSHIP

| **EVENT INFORMATION** (To be completed in full by the sponsoring OSU – Oklahoma City department.) | | |
|---|---|---|
| **Name of Event (No Abbreviations or Acronyms):** | | |
| **Date/s of Event:** | | |
| **Time/s of Event:** | | |
| **Organization (No Abbreviations or Acronyms):** | | |
| **Address:** | | |
| **City:** | **State:** | **Zip:** |
| **Relationship of Organization to OSU – Oklahoma City:** | | |
| **Organization Event Contact Person:** | | |
| **E-mail Address:** | **Phone #:** | **Fax #:** |
| **Who will be attending?** ☐ **OSU-OKC Only** ☐ **Public Only** ☐ **Both (Estimate __ OSU-OKC attendees)** | | |
| **Catering: OSU - OKC has an exclusive contract with the on-campus caterer. All food and beverages must be purchased through the caterer.** | | |

| **SPONSORSHIP INFORMATION** (To be completed in full by the sponsoring OSU – Oklahoma City department.) **Sponsoring department must have an active role and/or must be an attendee** | |
|---|---|
| **Sponsoring Department:** | |
| **OSU – Oklahoma City Contact Person:** | **Ext.** |
| **If Sponsoring Department is paying for room rental, please list account number:** | |
| **Role of Contact Person in the Event:** **(Must have an active role and/or must be an attendee)** | |
| **Briefly, state the purpose of the event?** | |
| **Division Head/Director Authorization Signature:** | **Date:** |
| **Vice President of Division Authorization Signature:** | **Date:** |
| **President Authorization Signature:** | **Date:** |

| **LIST OF ESTIMATED SPONSORSHIP RESOURCES** | | **(President Use Only 100% sponsored)** | |
|---|---|---|---|
| | | **Approved** | **Not Approved** |
| **List of Facilities/Rooms Requested:** | | | |
| **$25 half day rental** | **$** | | |
| **$50 full day rental** | **$** | | |
| | **$** | | |
| **100% Sponsored, must be approved by President** | **$** | | |
| **Total Amount Due:** | **$** | | |

**cc: Scheduling Office Sponsoring Department**