

Blugold Dining Food Waiver Request Application

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To be submitted to the General Manager of Blugold Dining Services at the Davies Center 250

This document must be submitted no later than 14 days before the event date

Name of the event: _____ Date: _____

Event Coordinator(s): _____ Cell Phone #: _____

Email Address (print clearly): _____

Name of Club, Organization, Department, College, etc.: _____

Location (be specific) _____

Description of Event: _____

List all food and beverage to be served including descriptions, amounts and brand names:

Start & Stop times for food service: _____ Approximate number of people: _____

Where will the food and beverage be obtained?: _____

Please attach vendor invoice to this form

Who will prepare the food and beverage?: _____ Phone #: _____

Check appropriate boxes:

Authorized UWEC Event Giveaways Fundraising Event Donation
Advisor: _____ Phone #: _____ Date _____

Event Coordinator: _____ Phone #: _____ Date: _____

Blugold Dining Signature: _____ Date: _____

Approved Fundraiser Other