

Culture and Heritage Houses Group Use Application

PLEASE NOTE: Washington State University faculty, staff, Registered Student Organizations (RSO), and non-WSU community groups are eligible to use the Culture and Heritage Houses for events. Please make your request at least two weeks in advance. Reservation requests within two weeks may be denied.

Name of event: _____ Name of group: _____

Date of event: _____ Estimated number of participants: _____

Begin & end (time): _____ Event coordinator: _____

Coordinator phone: _____ Coordinator email: _____

If Applicable:

Faculty/Staff Advisor: _____ Advisor's Department: _____

Advisor's Phone: _____ Advisor's email: _____

Please indicate which house(s) you would like to use:

Asian Pacific American Cultural House (Occupancy 40)

Casa Latina (Occupancy 25)

Native American Cultural House (Occupancy 40)

Talmadge Anderson Heritage House (Occupancy 20)

Please describe your event. What will take place? How does the event contribute to the academic and/or diversity mission of WSU?

Do you plan to use the projector? Yes _____ No _____ Will you be serving food? Yes _____ No _____

Do you plan to use our laptop? Yes _____ No _____

Description of food: _____

Tables and chairs needed: _____

Additional requests: _____

FEES (EFFECTIVE AUGUST 1, 2013):

WSU FACULTY, STAFF, AND REGISTERED STUDENT ORGANIZATIONS: **NO CHARGE**

NON-WSU GROUPS:

Asian Pacific American Cultural House **\$65 per day + \$50 cleaning fee =** **\$115**

Casa Latina **\$55 per day + \$50 cleaning fee =** **\$105**

Native American Cultural House **\$60 per day + \$50 cleaning fee =** **\$110**

Talmadge Anderson Heritage House **\$60 per day + \$50 cleaning fee =** **\$110**

Prices include all applicable taxes

I agree to the following:

I was provided with a copy of the **Culture and Heritage Houses Policies**. I have read and understand the policies and will ensure all parties related to this reservation follow the guidelines described therein.

In addition, please ensure that all doors are locked when you leave the house.

Coordinator Signature: _____ Date: _____

Advisor Signature (if applicable): _____ Date: _____

INTERNAL USE ONLY

Monies received by: _____ Date: _____

Total amount collected: \$ _____ Check number _____ Cash _____ IRI _____

Key checked out to: _____ Title: _____ Date: _____