

Organization Item Request Form

****24 hours needed for all requests****

Organization (no acronyms): _____

Requestor: _____

Date Service is Required by: _____

Phone: _____ **Email:** _____

Service(s) Requested:

Amount
Requested

_____ **Helium**- 5 dozen free per semester-must bring own balloons

_____ **Buttons**- 250 free per semester

_____ **Poster Printing**- B/W-Free-first 3 posters up to 4 ft. each per semester
Color-Free-first 2 posters up to 4 ft. each per semester

_____ **Lamination**- Individual Pages- First 10 free per semester
Posters- First 5 free per semester

Remaining Number: _____

Special Instructions: _____

For more information on policies, please see HYPE staff, MSC 3303 or 4-4573.

X

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Organization Requestor's Signature upon receipt of job

Office Use ONLY

_____ Date Compl.

_____ SA initials