

Date Received_____

For Office Use Only

MALIBU SETUP REQUEST FORM

Please Note: Setup Request Forms must be submitted at least **two weeks before the "Event Date"**

Requestor's Name:_____Phone Number:_____Department Name:_____

Please Check if ☐ Student Organization or Club Name of Club or Org: _____

Note: Student requests **MUST BE** authorized through the **STUDENT ACTIVITIES DEPT** before submission

Location: _____Event Name: _____

Set Up By Date: _____Time: _____AM / PM

Take Down By Date: _____Time: _____AM / PM

Required = * (Chartstring not required for Student Organizations or Clubs)

Chartstring: Fund* _____DeptID* _____Acct#* _____Class* _____Prog/Prod/Proj/OperUnit _____

Equipment Requested (State quantity)

8' Folding Table (Seats 8): _____6' Folding Table (Seats 6): _____60" Round Tables (Seats 8): _____

Folding Chairs: _____Trash Cans: _____Podium: _____Sign Holders: _____

Canopy 20x20 (2 Available): _____Canopy 10x10 (4 Available): _____Umbrella: _____Stage Pieces: _____

Describe Setup: _____

Please Provide A Sketch Of Setup:

Approved By:_____Date:_____

Room Reservations: **Must be made in 25 Live.**

Catering services, contact Bon Appetit at Ext: 4121

Work Order#

Email setup request form to moving.setup@pepperdine.edu

Events scheduled with less than two weeks' notice are subject to a **\$100 Urgency Surcharge**
or Setup Request denial.