



Reservation #: \_\_\_\_\_

EC: \_\_\_\_\_

## STUDENT UNION & EVENT SERVICES CHANGE/CANCELLATION REQUEST FORM

4505 S. Maryland Pkwy Box 452008, Las Vegas, NV 89154-2008 • Phone (702) 895-4449 • Fax (702) 895-1609  
• Email [eventservices@unlv.edu](mailto:eventservices@unlv.edu)

### Please Check:

☐ **Change** \_\_\_Contact \_\_\_Date \_\_\_Time \_\_\_# of Attendees \_\_\_Location \_\_\_Room setup\_\_\_ Equipment \_\_\_Other

☐ **Add Date(s)**

☐ **Cancel**

### Registered Student Organizations and University Departments:

Cancellations must be submitted at least seven (7) days prior to the event. Cancellations made within the seven (7) day timeframe are subject to late cancellation fees.

### Non-University Groups:

Cancellations must be submitted at least thirty (30) days prior to the event and are subject to a cancellation fee. Cancellations made within the thirty (30) day timeframe are subject to forfeiture of deposit and/or late cancellation fees.

**Name of Organization/Department:** \_\_\_\_\_

**Event Name:** \_\_\_\_\_

**Event Date:** \_\_\_\_\_ **Event Location:** \_\_\_\_\_

**Change Details/Cancellation Reason:** \_\_\_\_\_

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*Your signature on this form indicates your ability as the Primary or Secondary Contact of the reservation to request changes or cancellations. You further acknowledge that the above is only a request and that it is not guaranteed nor in effect until notice is received from the office of Student Union & Event Services. If your request is granted, you recognize that you and your event may be subject to additional policies and/or fees, where applicable.*

**Contact Name (please print):** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### For Office Use Only

Date Received: \_\_\_\_\_ Date Completed: \_\_\_\_\_ Completed By: \_\_\_\_\_