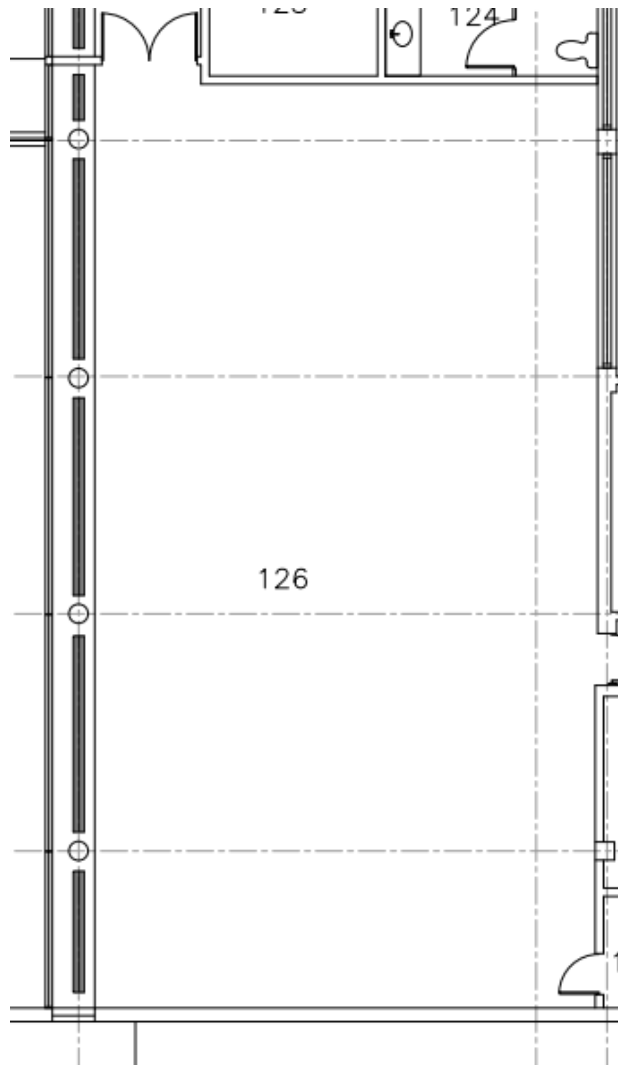


Halpern Centre



Room 126

Club/ DSU Name:

Date:

On-Site Contact:

Contact Phone:

Setup Time:

Event Start:

Event End:

Reset Time:

Notes:
