

Permit # _____

SOLICITATION TABLE PERMIT
Ithaca College

Sponsoring Organization: _____ Phone Number: _____

Contact Person: _____ E-Mail Address: _____

Local Address: _____

1. Product/Program: _____

- NOTES:**
- Please be specific, include if vendor involved, if food is pre-wrapped from store. Give details on a separate sheet if necessary.
 - When an Off-Campus Vendor is involved, a Fundraising Contract **must** be attached with this form for approval. **Do not** allow the vendor sign the Fundraising Contract before this application has been approved.

2. Facility Requested: _____
(Campus Center Lobby, North Foyer, Textor, etc.)

3. Approval For Other Facilities OR Services Requested: _____

4. Number of Tables Requested (*specify # of 6 ft. tables*): _____

5. Requested **DATE(S)** For Facility: _____
If you plan on doing this same program later in the year, please keep this permit and bring it with you back to the office to request additional dates / times. This will expedite your program planning.

6. Requested **TIME(S)** For Facility (available **M-F 9am-3pm**): _____

7. Food Guidelines Received By: _____ Date: _____

I have read the Ithaca College Solicitation and Advertising Policy and promise to abide by the regulations existing as of this date. Failure to abide by this Policy is a direct violation of the Ithaca College Student Conduct Code and is subject to judicial action.

I understand that acceptance of this agreement by Ithaca College in no way lends to the College's endorsement to the product, idea, or program in question.

SIGNATURE: _____ **DATE:** _____
(Applicant)

****You MUST bring this permit with you when requesting an Extension on the existing date(s)/time(s) of this permit. There will be a \$5.00 replacement fee for ALL lost permits.**

<u>For Campus Center Office Use Only</u>	
APPROVED <input type="checkbox"/> DISAPPROVED <input type="checkbox"/>	INITIALS _____ DATE _____
COMMENTS _____	

03/26/08

PLEASE BRING THIS APPROVED FORM WITH YOU WHEN YOU ARE TABLING