



REQUEST FOR DISSEMINATION OF LITERATURE, PUBLIC EXHIBITS, DISPLAYS AND PRESENTATIONS

Name of Group: \_\_\_\_\_

Date of Activity: \_\_\_\_\_ Time of Activity: \_\_\_\_\_
MM/DD/YY From To
Use a.m. or p.m. and noon or midnight.

Contact Person: \_\_\_\_\_
Please print.

Mailing Address: \_\_\_\_\_
Street/P.O. Box City State Zip Code

Telephone No.: \_\_\_\_\_ Email Address: \_\_\_\_\_

Type of Activity: \_\_\_\_\_

Intended Audience: \_\_\_\_\_

Location Requested: \_\_\_\_\_

Complete description of exhibit, display, presentation, event or activity:
(Please attach copies of any materials to be distributed.)

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Applicant Signature

Date: MM/DD/YY

Please complete this form on your computer, save and return to the Office of Student Life, Bryant Student Union, CF Ocala Campus, 3001 S.W. College Road, Ocala, FL 34474-4415 or Citrus Campus, 3800 S. Lecanto Highway, Lecanto, FL 34461-9026.

For office use only.

Received by: \_\_\_\_\_
Signature

Date: MM/DD/YY

[ ] Approved [ ] Denied

Signature

Date: MM/DD/YY