Sale/Event Date: __________________

Start Time: ______________  
End Time: ______________

Registration of Baked Goods & Beverages Sales

Student Organization Name: ____________________________________________________

Contact for Event/Sale:
Name: ______________________ Phone: ____________________________  
Email: ________________________________________________________________

Alternate contact (person also at sale):
Name: ______________________ Phone: ____________________________  
Email: ________________________________________________________________

Name and Address of any associated business (if any):
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

**LIST OF ALL FOODS TO BE SERVED (SOLIDS AND LIQUIDS)**
(Include any pre-packaged items, i.e. bottled water and canned soda)

1. ________________________________  2. ________________________________
3. ________________________________  4. ________________________________

Where were foods purchased (if home baked include by whom):
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

By signing below, I understand and will comply with the guidelines for baked goods and beverages sales for student organizations at the Rice University Student Center.

Applicant name (print): _______________________  Applicant Signature: _______________________  Date: ______________

Approved: _______________________  Denied: _______________________  
Student Center Representative: _______________________  Date: ______________

For Office Use Only:  Length of time to distribute items: ____________ hrs.
Group Check In: ____________ am/pm  Group Check Out: ____________ am/pm
Initial Time  Initial Time