Submit form to Conference Services @ LBJSC front desk on the 2nd floor of the LBJ Student Center at least ten (10) business days before the requested HUB date (weekends/university closures due to holidays excluded). All forms, policies, and procedures are subject to change and can be found at http://getinvolved.lbjsc.txstate.edu/Policy-and-Procedures/Solicitation.html. Please note that Chartered Student Organizations and departments at the LBJ Student Center have priority for using the HUB. Other inquiries will be considered on a first come, first served basis for available dates.

Organization/Department: ____________________________________________________

Requested Dates: ____________________________________________________________

Preferred Time: ______________________________________________________________

Hub spaces needed (please circle): 1 2

**Please note, there are two Hub tables available, so you may be sharing the space with another organization. We ask that you only reserve the space you need.

Detailed Description of Use:
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Please initial each statement below indicating that you have read and understand the HUB rules and regulations:

_____ A copy of materials to be distributed is attached
_____ Amplified sound is NOT allowed in the HUB
_____ A member of the organization/department must be present at all times
_____ The organization will restore the HUB and any surrounding furniture to its original state and remove any trash/waste from the area
_____ All related policies and procedures have been read and understood
_____ The HUB is used only to promote programs and initiatives within Student Affairs at Texas State University, and not to sponsor vendors or outside programs

Organization Name: __________________________________________________________

President (Print): ___________________________ President Signature: __________________________

President Email: __________________________

Advisor or Department Representative (print): ______________________________________

TXST Email: ___________________ Phone: ___________________ Date: ___________________

Advisor/Department Representative Signature: __________________________

Conference Services Approval: __________________________________ Date: ____________

Conference Services @ LBJSC

LBJSC 2nd floor
512-245-2264
lbjsc.txstate.edu