UNIVERSITY of **HOUSTON**

Parking and Transportation

Phone: 832-842-1097 Email form to evntpark@central.uh.edu

REQUEST FOR SPECIAL PARKING AND VALET

Please complete and return form to eventpark@central.uh.edu for processing.

Contact Person:

Phone:

Email Address:	Department:
Name of Event:	
Date (s) of Event:	Event Location:
Time of Event:	Expected Time of Guest Arrival:
Parking Attendant: Yes: N	o: Number of Attendants:

VALET

	V/\LL!			
Number of guest:	Time first guest arrives:		_Time event ends:	
Location of Event:	S	pecial Reque	est:	
Payment Method: SC Vouch Special Needs:	er: C	heck/Credit	Card:	

For Parking Service Use Only

Date:	Location: _			
Cost for Space(s):		Set up/Take down fee:	Attendant:	
Estimate Total Cost		Supervisor Signature:		