National Library of Medicine

Request to Use the LHC Auditorium

Use prescribed by NIH Manual 1363-1

| Today's | Date |
|------------|------|
| mm/dd/yyyy | |

| Sponsoring IC or Organization | | Event Contact Coordinator's Name | | | | |
|--|---------------|----------------------------------|---|------------|----------|--|
| | | Phone: | | E-mail: | | |
| Sponsor's Contact Name and Title: | | Event Onsite Coordinator's Name | | | | |
| Phone: | Phone: | | E-mail: | | | |
| E-mail: | | IC or Or | C or Organization: | | | |
| Event Name | | | | | | |
| Event Start Date: Event End Date: | | Event Date | es | Start Time | End Time | |
| Event Set-up Time: | | Day 1 | | | | |
| Request for Reques | | Day 2 | | | | |
| Walkthrough Date: Rehearsal Date: | | Day 3 | | | | |
| Estimated Number of Guests: Press Coverage | | Day 4 | | | | |
| (Auditorium seats 176) NIH: Non-NIH: | Expected?: | Day 5 | | | | |
| INITI. INOTI-INITI. | | | | | | |
| Purpose of Event (prov | ide details k | nown at th | nis time |) | | |
| For Internal Use Only | | | Return to LHC Auditorium Coordinator's Office | | | |
| Signature of LHC Auditorium Coordin | nator: Date: | fax: 3 | e-mail: nlmaud@nlm.nih.gov fax: 301-480-0155 mail to: NIH Building 38A, Room 122 8600 Rockville Pike Bethesda, MD 20894 | | | |