

## Cancellation Form for Meetings and Events

### Customer

Student Wildcat ID# (if applicable): \_\_\_\_\_

Name (First, Last) \_\_\_\_\_

Address: \_\_\_\_\_

Apt # \_\_\_\_\_

Phone # \_\_\_\_\_

Email Address: \_\_\_\_\_

Planned date of event: \_\_\_\_\_

Reason for Cancellation:

\_\_\_\_\_

Request Submitted on: \_\_\_\_\_

### Confirmation

Staff Name: \_\_\_\_\_

Staff Position: \_\_\_\_\_

Phone # \_\_\_\_\_

Email Address: \_\_\_\_\_

**I, (Client Name) \_\_\_\_\_, understand that I am requesting a cancellation. Under this option I agree that I must submit this cancellation request in the times listed above in order to receive a refund. I understand that if all conditions are met, K-State Housing and Dining Services agrees to refund partial or all of the previously paid amount for the rental of the space.**

Customer Resident Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name Print: \_\_\_\_\_

Date: \_\_\_\_\_

KSU HDS Staff Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Associate Director Approval: \_\_\_\_\_

Date: \_\_\_\_\_