

Event Parking Permit Request Form

Date: _____
Name of Requestor: _____ Phone: _____
Dept. or Organization: _____ Email: _____
Address: _____ Fax #: _____
City, State: _____ Zip: _____

Title of Event or Guest Speaker: _____

Location of Event: _____

Parking Permit Options: (Choose all that apply)

Garage Only Conference Parking

Beginning Date: ____/____/____ to Ending Date: ____/____/____
Times of Conference: _____ to _____
Number of permits: _____ x \$4.00 = _____

OTHER CONFERENCE PARKING

Reserved meter exempt space(s) in any metered area. Please attach a list of names of those attending. (Price includes conference permit.)
NOT VALID IN THE PARKING GARAGE

Beginning Date: ____/____/____ to Ending Date: ____/____/____ Location: _____
Times of Conference: _____ to _____
Number of permits: _____ x \$15.00 = _____

Meter exempt permit(s) good for any metered stall(s) or in W, O, R, T & Z stalls. **NOT VALID IN THE PARKING GARAGE.**

Beginning Date: ____/____/____ to Ending Date: ____/____/____
Times of Conference: _____ to _____
Number of permits: _____ x \$12.00 = _____

Conference Permits available for guest, conference attendees and visitors. No reserved spaces. **NOT VALID IN THE PARKING GARAGE**

Beginning Date: ____/____/____ to Ending Date: ____/____/____
Times of Conference: _____ to _____
Number of permits: _____ x \$4.00 = _____

Methods of delivery:

- Mail to department. Date: _____ Available only if arrangements are made one week in advance.
- Pick up at Parking Services on: _____
- Pick up at Information booth on 17th Street (If 10 or Less)

Method of payment:

- Bill the department at the address above (if different address: _____)
- Participants will purchase permit(s) when they pick them up at the booth
- Payment enclosed
- Pay when picking up Permits at Parking Services.

Special Circumstances:

Signed: _____
Questions? Call Parking at (785) 532-7275
Or Fax at (785) 532-2601

Office Use Only

Event # _____ Bulk # _____ Account # _____
PCO needed: Yes No PCO Times _____