MACAU UNIVERSITY OF SCIENCE AND TECHNOLOGY

Campus Venues Reservation Form

For Apply Unit	
Apply Unit:	Contact person:
Tel.:	Email:

Reservation Details

1. Activities _____
2. Activity Type_____ No. of Participants_____
3. Date: _____ Time _____ to Date _____ Time _____

Venue Reservation

1. ☐ Lecture Rooms 2. ☐ Exhibition Hall
3. ☐ Auditorium 4. ☐ Promotion Counter
5. ☐ (/ / /)

Athletic Field (Gymnasium/ Badminton Court/ Tennis Court/Football Field/Stadium)

“ ” Equipment request: please fill in the “Equipment Reservation Form”

/

Content/Purpose (Please enclose the attachment if the blanks are not enough)

Remark

1. 30 gaservices@must.edu.mo
: 28881122 Please submit the original to General Affairs Office Service Counter 30 days before using the venue or scan and email the completed form to gaservices@must.edu.mo. For enquiry Tel.:28881122.
2. < >
The applicant must agree and obey the <Campus Venues Leasing Regulations> and related venues use regulations.

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For GA

/ Comment/ Remark	
☐ Agree to arrange_____	Date
☐ Disagree to arrange_____	