



Rice Memorial Center

Ley Student Center

Event Sponsorship Form

Name of Individual(s) who is (are) being sponsored _____

Address: _____

Street Address City State Zip

Phone number: _____ Email address: _____

Date of Event to be Sponsored _____

Location and Time of Sponsored Event: _____

Name of Sponsor _____

Address: _____

Street Address City State Zip

Phone number: _____ Email address: _____

Applicable Sponsor Category

___ Current Rice Student

___ Rice alumni/Class of _____

___ Current Rice Faculty/Staff Member

___ Child or Grandchild of one of the above categories

Sponsor's relation to the couple is _____

Reason why this event should take place at Rice _____

By submitting and signing this letter I understand that as a sponsor I may be held liable for any damages Rice University incurs, resulting from the sponsored event.

Sponsor's Signature _____
Date

Sponsor's Printed Name