



**Nevada Supreme Court
Special Event Request Form**

Event Contact Name: _____ Phone Number: _____

E-mail Address: _____

Name of Event: _____

Date of Event: _____ Start Time: _____ End Time: _____

Projected Number of Attendees: _____

Number of Chairs Required: _____

Number of Tables Required:

_____ 60" Round (6 Max)

_____ 36" Round "High-Boy" (8 Max)

_____ 8' Rectangle (2 Max)

_____ 6' Rectangle (2 Max)

Request Table Cloths: Yes No

Food and Beverage: Yes No

Catered: Yes No

Caterer Name: _____ Phone Number: _____

E-mail Address: _____

Location of Event:

Rotunda (2nd Floor)

Court Room (2nd Floor)

Law Library, Room(s): _____

Other, Specify: _____

A/V Equipment Required: Yes No

Type: _____

Form may be submitted by fax, mail, or e-mail to:

Tracie Lindeman, Clerk of the Court
Nevada Supreme Court Clerk's Office
201 South Carson Street
Carson City, NV 89701
(775) 684-1600
Fax (775) 684-1601