



**Department of Facilities Management
Conference Services**

**UNIVERSITY OF KING'S COLLEGE
FOOD WAIVER
(NOT CATERED BY UNIVERSITY FOOD SERVICE)**

NAME OF ORGANIZATION: _____
DATE & TIME OF FUNCTION: _____
LOCATION OF FUNCTION: _____
OF PARTICIPANTS: _____
TYPE OF FUNCTION: _____
MENU: _____
FOOD PREPARED BY: _____

Food Donated?	Yes	No
Commercial Affiliation?	Yes	No
Charging Admission?	Yes	No
Soliciting Public Attendance?	Yes	No
Liquor Service?	Yes	No

WAIVER:

It is hereby agreed that the group noted above will take full responsibility and waive all liability from the University of King's College and Sodexo Canada Ltd. of claims or actions that relate to the food provided at the event noted above.

Group Representative's Name: _____ Tel.: _____

Group Representative's Signature: _____ Date: _____

Group Representative's Title: _____

Attachment: Yes No

Approved by: _____ Date: _____

Celine Beland, General Manager
Sodexo Canada Ltd.

Appeal to Bonnie Sands , Bursar. Bonnie.Sands@ukings.ca

Copy: Sodexo _____ Applicant _____ Conference Services _____

NOTE: 10 DAYS PRIOR NOTICE IS REQUIRED FOR PROPER PROCESSING OF THIS REQUEST

