

Event Request Form

All event forms must be submitted **TYPED (aside from signatures)** and **submitted at least 21 days** prior to the event. All catered events must use Aramark, unless a waiver is provided. University policy prohibits students from signing contracts.

Approvals/denials of event requests will be placed in your mailbox in the office of Student Activities and Leadership.

Official Use Only

Approved: Yes _____ No _____ Date: _____

If no, reason: Conflict in time/location Other: _____

Club/Organization: _____

Date of Event: _____

Event Title: _____

Event Description: _____

Event Type: Party Variety Show Meeting Forum/Speaker Performance

Will admission be charged for the event? Yes No Tickets sold: Door Pre-Sale None

Does your event have food? Yes No **Expected Attendance:** 0-50 50-75 75-125 Over 125

1st Choice Location: _____

2nd Choice Location: _____

Start Time of Event: _____ **End Time of Event:** _____ **Set Up Time:** _____ **Break Down Time:** _____

Does your event have decorations? Yes No **Does your event require amplified sound?** Yes No

Does your event require special parking? Yes No **If yes, how many anticipated spaces?** _____

Set up requests:

#of tables: _____ #of chairs _____ Podium Empty Room Auditorium Style U-Shaped Classroom

Audio/Visual Needs:

Does your event require special technology? Yes No

If yes, please indicate your needs: Outdoor power Microphone/s How many mics? _____
PA System Projector Screen Laptop Other: _____

Some events may require additional services that are the financial responsibility of the sponsoring club/organization, i.e. cleaning, public safety, etc.

Submitting this form indicates that your club/organization accepts all financial responsibility of the event and understands and agrees to all policies set forth with holding a function.

ALL RESERVED SPACES MUST BE RETURNED TO THEIR ORIGINAL SET UP AFTER THE EVENT. Failure to adhere will result in your club/organization's denial of future events.

Club/Organization Representative (print): _____ **Sign:** _____ **Date:** _____

University Email: _____ Phone: _____

Advisor (print): _____ **Sign:** _____ **Date:** _____

University Email: _____ Phone: _____