

Event Registration & Request Form For Provisionally Recognized Student Organizations

- Due 2 weeks before the event -

The Basics

Event Title: _____

Sponsoring Organization(s): _____

Event Description: _____

Date of Event: _____ Setup Time: _____ Time of Event: _____ Ending: _____

Location of Event: _____ (Option 1) _____ (Option 2)

Room Reservation

If the event is approved, a room reservation request will be submitted by AUSA. The student email address provided on the back of this form and the organization's advisor will both receive a notice that the request has been received. They will also receive an email notifying them when the room request has been approved/denied. Please allow five to seven working days for this to be processed. Should you have a question about this, please contact the OSA at *6510 to speak with Jabari or Brandy.

Anticipated Attendance: _____ Target Audience: _____

Is the event open to all students? _____ Yes _____ No

Will there be a charge to participate in the event? _____ Yes _____ No If yes, how much?

How will this event help you recruit new members? (Please provide at least one paragraph)

Event Contact Person:

Name: _____ Phone: _____

Signature: _____ AU Email Address: _____

Advisor

Name: _____ Phone: _____

Signature: _____ AU Email Address: _____

--Office of Student Activities Use Only--

Event Approved: _____ Denied: _____ Date: _____ Director of Student Activities: _____

Comments: _____

Item	YES	NO	Date	Notes
Date & Time Available				
Entered into Calendar- OSA				
Room Available/Reserved				
Funding Requested				
Funding Reviewed On				
Sodexo Needed/Contacted				
Blue Crew Needed/Contacted	/	/		
Media Needed/Contacted	/	/		
Security Needed/Contacted	/	/		
Advisor Required at Event				