

DATE SUBMITTED: _____



CAMPUS LIFE APPROVAL & STAMP

Student Organization Event Request Form

All event request forms must be **TYPED** (except signatures) and **submitted at least 14 days** prior to the event. All catered events must use **Thompson Hospitality**, contact is as follows: coppincatering@thompsonhospitality.com or **410-951-1229**. **Events and Conference Services** will provide the **FINAL** approval/denial of event request via email confirmation to the Club/Organization Advisor, representative and clubs/organization email. University policy prohibits students from signing contracts, this request is not considered a contract. **Notice of Cancellation must be submitted in writing to eventservices@coppin.edu at least 7 days prior to your event.**

Club/Organization Name _____

Club/Organization Representative Name (print): _____

University Email: _____ Phone: _____

Signature: _____ Date: _____

Advisor Name (print): _____

University Email: _____ Phone: _____

Signature: _____ Date: _____

Event Title: _____ Event Date: _____

Expected Attendance: _____ Event Description: _____

1st Choice Location: _____ 2nd Choice Location: _____

Set-up Time: _____ Start Time: _____ End Time: _____ Breakdown Time: _____

Has Flyer been approved for the event? Yes No Does your event have food? Yes No

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

**IF Tickets are being sold at the door, Public Safety is required, Event Services will provide them with the event details.*

Does your event have signage and/or decorations (including balloons)? Yes* No (If yes, all items must be freestanding. Do not affix decorations or signage onto the walls, doors, partitions, etc. Because of limited space, decorations and signage should be set up no more than two hours before your event and must be removed at the end of your event).

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

Set up requests: Once approved by Event Services the club/organization will submit the set-up request via email through the online portal at <https://www.coppin.edu/webform/event-set-request>.

Audio/Visual Needs

NOTE: Please ensure that sound volume (i.e. music, cheers, etc.) is at a reasonable level, so as not to disrupt others.

Please indicate your AV needs: Outdoor power Microphone(s) How many mics? _____

PA System Screen Projector Laptop Other: _____

Please Note: Some events may require additional services that are the financial responsibility of the sponsoring club/organization, i.e. cleaning, public safety*, etc. and these services will be billed separately.

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 LEFT CLEAN AND ORGANIZED. All decorations (see description above) must be removed from the location. Failure to adhere will result in your club/organization's denial of future events.