

# Event Registration Form

## Event Registration Process

1. Check out the University Calendar before selecting your event date to make sure it does not conflict.
2. Fill out *Event Registration Form* (2 Weeks Prior to Event) to get approval to host the event.
3. If approved, an email will be sent within 24 hours to the 'Event Contact' and the Physical Plant Office for the ability to make reservations with Physical Plant, Computer Services, Sodexo, ect.
  - Make Room Reservations with Julie McGaha in Physical Plant located in Conway 4<sup>th</sup> Floor, Room 403; [Julie.mcgaha@rockhurst.edu](mailto:Julie.mcgaha@rockhurst.edu) or (816) 501-4566.
  - Reserve catering needs with Sodexo:  
Sara McNeely, Dining Services at [Sara.Mcneely@rockhurst.edu](mailto:Sara.Mcneely@rockhurst.edu)
  - Reserve any AV needs with Computer Services Helpdesk:  
Conway 4<sup>th</sup> Floor or (816) 501-4357.
4. If you have a speaker or special guest to campus, you must turn in a *Contract and Payment Request Form*; located on the Student Life website. This must be turned in with your Event Registration Form at least 4 weeks before your event.
5. Obtain a *Purchase Order (PO)* for anything over \$500.00 before making a purchase.
6. Publicize your event, and get posters approved in Student Life
7. Once your event is approved, if you email Student Life at [studentactivities@rockhurst.edu](mailto:studentactivities@rockhurst.edu) we will post your event on the University Calendar.

# Event Registration Form

All student organizations must register their on-campus events at least two weeks prior to the event. The registration form must be submitted to Student Life for approval of the event prior to scheduling. Once the event is approved they will be allowed to reserve space on-campus for their event, and continue planning.

## Contact Information

Organization: \_\_\_\_\_ Date of Event: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Type of Event

Meeting     Event     Fundraiser     Practice     Other: \_\_\_\_\_

## Event Information

Name of Event: \_\_\_\_\_  
Description of Event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proposed Date of Event: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Desired Location: \_\_\_\_\_

Does your event need catering?     No     Yes (Please list) \_\_\_\_\_  
Does your event need tables/chairs?     No     Yes (Please list) \_\_\_\_\_  
Does your event need AV setup?     No     Yes (Please list) \_\_\_\_\_

## Student Life Use

Date Received: \_\_\_\_\_  
 Approved     Not Approved  
 Approved with Adjustments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Put on University Calendar
- Received Contract and Payment Request Form
- Emailed Physical Plant Request Form/Approval for reservations
- Emailed Security of Event Registration (If Necessary)
- Approved a Flyer for Event

## Physical Plant Office Use

Date Received: \_\_\_\_\_ Location Reserved: \_\_\_\_\_