

Event Registration Form

All student organization events must have a completed Event Registration Form. This form is **NOT** your reservation. To reserve space you must make a reservation with the Scheduling & Event Services Offices located in the Hypostyle room 207.

ORGANIZATION INFORMATION Organization Name: Index Code:			
Student Contact—Student Responsible for Event:			
Name:			
Email:	Phone:		
Advisor Contact—Advisor Responsible for Event: Name:			
	Phone:		
rganization	Reviewed by:		
aniz	Date Reviewed:		
Org	Student Organization		

Le Student Organization Greek Life Student Activities Board Other:	anizatior	Reviewed by: Date Reviewed:
	For Student Organizatior use only.	 Greek Life Student Activities Board

Event Name and Description:

Attendance Cost:	Ticket Sale Location:	
Event Date(s):		
Start Time:	art Time: End Time:	
Location:	Rainsite:	
Intended Audience: (Plea	se check all that apply)	
Organization Members	□ ISU Students □ Faculty/Staff □ Publ	lic
Estimated Attendees:		
Is your event suitable for	minors? 🗆 Yes 🗆 No	
If no, please explain:		
Will food be served at you	ur event? □ Yes □ No If yes	
(If no, you must submit a d	g the food at your event?	
	SIGNATORES	
Organization Advisor-First r	required signature	Date
Chartwells (needed if there	e is food at event)	Date
Scheduling Office (needed	for events in the Student Union or Rendezvous	s) Date
Student Activities Coordina	ator	Date