Meridian Event Registration Form

Student Organizations
208-373-1700
1311 E. Central Drive Meridian, Idaho 83642
Administration Office

Contact Information
Organization: _______________________

Student Contact – Student Responsible for Event:
Name: ______________________________
E-Mail: ______________________________
Phone Number: _______________________

Advisor Contact – Advisor Responsible for Event:
Name: ______________________________
E-Mail: ______________________________
Phone Number: _______________________

Name of Event: __________________________
Type of Event (performer/meeting): _________
_______________________________________
Event Dates: ____________________________
Event Start Time: ________ End Time: ______
Event Location: ________________________

**NOTE**
You will be responsible for set-up and clean-up of your event – including tables, chairs, etc.

Do you need tables? ______ # of tables: ______
Will Food be served at your event? __________
Do you need extra garbage cans? ___________

Intended Audience:
☐ Student ☐ Faculty ☐ Staff ☐ Organization
☐ Public (explain): _______________________
Approximate # of attendees: __________
Is your event suitable for minors? ______
If no please explain: _______________________
Will you need Public Safety at your event? ____

Event Set-Up/Audio Visual Services
Set-up Type: ☐ Theatre ☐ Classroom ☐ Banquet
☐ U-Shape ☐ Other (explain): ______________

Which, if any, AV equipment or services will you need? ☐ LCD ☐ Projector ☐ Podium/Mic
☐ Laptop Computer ☐ Microphone (s) # _______
☐ TV/VCR/DVD Player