

Idaho State UNIVERSITY

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: _____
Email: _____ Phone: _____

For Involvement
Center Use Only

Reviewed by:

Date Reviewed:

- Student Organization
- Greek Life
- Student Activities Board
- Other:

Event Name and Description:

Attendance Cost: _____ Ticket Sale Location: _____

Event Date(s): _____

Start Time: _____ End Time: _____

Location: _____ Rainsite: _____

Intended Audience: (Please check all that apply)

Organization Members ISU Students Faculty/Staff Public

Estimated Attendees: _____

Is your event suitable for minors? Yes No

If no, please explain: _____

Will food be served at your event? Yes No If yes...

Will Chartwells be serving the food at your event? Yes No
(If no, you must submit a catering waiver to Chartwells for approval.
Outside food may not be used without an approved catering waiver.)

SIGNATURES

Organization Advisor-First required signature _____ Date _____

Chartwells (needed if there is food at event) _____ Date _____

Scheduling Office (needed for events in the Student Union or Rendezvous) _____ Date _____

Student Activities Coordinator _____ Date _____