



# Event Information Sheet

- **Please fill out this form completely.**
- Completion of this form does not guarantee your reservation.
- After review, you will be contacted regarding next steps.
- Please plan accordingly to ensure your event complies with campus policies for reservation deadlines.

## CONTACT INFORMATION

Individual responsible and accountable for event who will provide details prior to and oversight during the event

Primary On-Campus Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Secondary On-Site Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## GROUP INFORMATION

Group Name: \_\_\_\_\_  Student Organization  Campus Department  Off-Campus Group

Institutional affiliation:  CCD  MSU Denver  CU Denver  AHEC

Are you partnering with another organization, group, or entity?  Yes  No

Partner Name: \_\_\_\_\_  Student Organization  On-Campus Group  Off-Campus Group

Account Number/FOAP/Speed Type\*: \_\_\_\_\_

*\*Student organizations will be required to complete the student authorization form for payment information.*

## EVENT INFORMATION

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

Date(s) of Event: \_\_\_\_\_ Expected number of attendees: \_\_\_\_\_

Event Start Time: \_\_\_\_\_ Event End Time: \_\_\_\_\_ Set-Up Time: \_\_\_\_\_ Tear-Down Time: \_\_\_\_\_

Location(s) requested (check all that apply):

- Tivoli 250 (Turnhalle)  Tivoli 440/540 (Adirondacks)  Tivoli 320ABC (Baerresen Ballroom)  St. Cajetan's  
 Tivoli 640  Tivoli 444  Outdoor: \_\_\_\_\_  Conference/Classroom  
 PE/Event Center  Other (please specify): \_\_\_\_\_

Event Type:  Meeting  Conference  Reception  Lecture  Cultural  Other: \_\_\_\_\_

Set-up:  Theater-style  Banquet  Other: \_\_\_\_\_

Equipment Needed:  Microphone (How many?): \_\_\_\_\_  Check-in Table (Skirted?):  Yes  No

Screen/Projector  Podium  Other: \_\_\_\_\_

## FOOD/ALCOHOL

Is food being served?  Yes  No If yes, which authorized caterer are you using? \_\_\_\_\_

Is alcohol being served?  Yes  No If alcohol is being served, an **Auraria Campus Alcohol Permit is required.**

## SIGNATURES/APPROVAL

I understand that if I do not cancel my event at least three days prior, there may be a no show fee assessed. The fines assessed will need to be paid before any future bookings can be made or completed.

**I have read the Auraria Campus Event Services Policies and Procedures and verify that the provided information is true and current.**

Primary Contact Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_