

# STUDENT ORGANIZATION EVENT PLANNING WORKSHEET

Bring this form completed to the Event Registration Meeting—Fridays at 10am, Campus Center Room 203

Today's Date: \_\_\_\_\_

**Sponsoring Student Organization/Department:**

**Dept ID#:**

1. \_\_\_\_\_

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2. \_\_\_\_\_

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**Sponsoring Student Organization/Department Contact:**

Primary Contact Name: \_\_\_\_\_

Tufts Email: \_\_\_\_\_

Secondary Contact Name: \_\_\_\_\_

Tufts Email: \_\_\_\_\_

## Event Details:

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

Event Day and Date (i.e Monday, 1/19/18): \_\_\_\_\_

Start Time: \_\_\_\_\_

End Time: \_\_\_\_\_

Event Location: \_\_\_\_\_

Expected Attendance: \_\_\_\_\_

**Audience (Circle):**

Tufts Students (Tufts ID)

Tufts Students Plus One

City Wide Event (College ID/18+)

Tickets Contract: Yes / No

If Yes, Desired Selling Start Date: \_\_\_\_\_

Food: Yes / No

If Yes, Which You Will Be Using: Tufts Catering / Outside Catering

## Services Needed:

Check all that apply:

☐ Facilities (tables, chairs, etc.) *\*\*if checked please complete the next page\*\**

☐ AV Needs (microphones, projector, etc.)

☐ Social Media (Do you want an OCL member to live post or photograph your event?)

- Please indicate contact name: \_\_\_\_\_ Or email: \_\_\_\_\_

☐ Tufts Catering Needs

☐ TUPD Detail Officer

☐ Student Event Staff

- Please indicate purpose for Event Staff: \_\_\_\_\_

## **Event Registration Committee Only**

| Location/Service:                | IDR/Confirmation #: |
|----------------------------------|---------------------|
| Cohen Auditorium                 |                     |
| 51 Winthrop Street               |                     |
| 574 Boston Ave.                  |                     |
| Goddall Chapel/Interfaith Center |                     |
| Event Staff                      |                     |
| Catering/Dining                  |                     |
| TUPD                             |                     |

# Facilities Work Order Requests:

***\*\*Work Orders should only be submitted by OCL or Department staff\*\****

**Items Needed**—Please list specific items needed, number of each, and preferred layout:

| Item(s) & Type (i.e. cocktail tables, long 6 ft. tables) | Number Needed |
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**Layout**—Please specify how you would like the space to look:

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## ***Event Registration Committee Only***

**Work Order #:** \_\_\_\_\_

**Date Entered:**\_\_\_\_\_