

Event Application

	DATE	
EVENT NAME		
REQUESTED EVENT DATE(S)	EST. START TIME	EST. END TIME
EST. ATTENDANCE		
REQUESTED ROOM(S)		
GROUP NAME		
REQUESTED BY		

Event Type

- | | | | | |
|-------------------------------------|-----------------------------------|---|---|--------------------------------------|
| <input type="checkbox"/> Athletics | <input type="checkbox"/> Ceremony | <input type="checkbox"/> Class | <input type="checkbox"/> Conference | <input type="checkbox"/> Dance Party |
| <input type="checkbox"/> Exhibition | <input type="checkbox"/> Fair | <input type="checkbox"/> Film/TV Production | <input type="checkbox"/> Film Screening | <input type="checkbox"/> Lecture |
| <input type="checkbox"/> Meal | <input type="checkbox"/> Meeting | <input type="checkbox"/> Performance | <input type="checkbox"/> Public Forum | <input type="checkbox"/> Photo Shoot |
| <input type="checkbox"/> Reception | <input type="checkbox"/> Training | | | |

Event Description: Please describe the theme, subjects, and goals of your event.

Are you charging admission for your event?

- Yes
 No

Will you be conducting transactions on campus (registration, merchandise sales, fundraising, etc.)?

- Yes
 No

Please select the intended audience for your event.

- | | |
|--|---|
| <input type="checkbox"/> Internal Guests | <input type="checkbox"/> Internal Guests + CUNY |
| <input type="checkbox"/> External Guests | <input type="checkbox"/> External Guests + CUNY |
| <input type="checkbox"/> Internal + External | <input type="checkbox"/> Internal + External + CUNY |

Will there be a large presence of minors (children under the age of 18) at your event?

- Yes
 No

Please describe any signage you will be using at your event. Please note: All signage must be approved by Space Reservations before printing and placement.

Are you expecting a media presence at your event?

- Yes
 No

Will there be catering at your event?

Yes **Name of Caterer:**

No

Will Sterno be used by your caterer?

Yes
 No

Will there be alcohol served at your event?

Yes
 No

Contractual Service

Internal Guests Internal Guests + CUNY
 External Guests External Guests + CUNY Internal + External
 Internal + External + CUNY

Guest Speaker

CUNY Speaker
 Internal Guest
 External Guest

Please write the name of the speaker(s)

Audio Visual Services Needed: Please indicate the quantity you are requesting for each category.

AVS does not provide zoom services. Please contact DOIT for a D10 board, should you need this service.

Q&A/ Wireless Microphone
 Table Microphone
 Podium Microphone
 Presentation Package (projector, laptop and screen)
 Music Playback

Indicate here:

Facilities Needed: Please indicate the quantity you are requesting for each category. Once you event is confirmed we will provide you with your EMS ID number, which you will reference when you submit your work order for furniture setup.

Chairs Red Carpet
 High Top Chairs Stage
 Rectangle Tables Step & Repeat
 Round Tables Podium
 Bistro Tables

Indicate Here:

Advisor Signature: