

STUDENT LIFE ORGANIZATION EVENT ROOM REQUEST

DATE SUBMITTED _____

Please complete the following information and submit to Student Life in Room 100 or 127.

The Student Life Department requires that event request forms be placed at least two weeks prior to the event date. Please attach your event flyer.

Events are subject to cancellation by the Student Life Department if the event misrepresents Miami Dade College.

ROOM/SPACE REQUEST INFORMATION:

Organization Name _____

Contact Name _____ Contact E-mail _____

Advisor Name _____ Advisor E-mail _____

Event Name _____ Expected Attendance _____

Event Description (meeting, fundraiser, workshop, rehearsal, etc.) _____

WILL ADMISSION, REGISTRATION OR ANY FEES BE CHARGED TO PARTICIPANTS?

YES

If yes, please explain

NO

PLEASE SELECT SPACE YOU ARE REQUESTING

Student Life Conference Room (Rm. 130)

Student Life Meeting (Rm. 103)

Front of Koffee House (Shark Tank)

The Talking Place (in Bldg. 6)

Auditorium, (Rm. 6120)

Bldg. 2 Breezeway (under flags)

Conference Center Rooms

Other

K413

K422

K423

K424

First Room/Space Choice _____ Second Room/Space Choice _____

Event Date/Time _____ Start Time _____ End Time _____
(mm/dd/yy)

Set up/Breakdown Time _____ Start Time _____ End Time _____

REPEAT

Random Dates _____ Weekly: Repeat Every _____ Week (s) _____
(mm/dd/yy, mm/dd/yy, etc.) (mm/dd/yy)

On: Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____ Saturday _____ Sunday _____ Until: _____

Continued on back

A/V, FACILITIES, CATERING, CAMPUS SAFETY

Will Food be served at the event?

YES (If yes, food must be provided by Chartwell, Inc. Please have your advisor contact Student Life)

NO

No AV Equipment Needed

MEDIA SERVICES

Please indicate equipment needed, or number of items. Charges may apply.

_____ House Sound (6120/K413)

_____ Portable Sound System from Student Life

_____ Cordless Microphones

_____ Corded Microphone (s)

_____ Screen/Projector

_____ Videography

_____ Photography

_____ DVD player

_____ Sound system (to play music)

_____ iPod input

CAMPUS SERVICES

_____ Stage (each pc is 6' x 8' - 5 pcs available)

_____ Chairs

_____ 6 ft tables

_____ Round tables

_____ Cocktail Tables (hi-top, 10 available)

_____ Podium

_____ Recycle Bins

_____ Trash cans

Additional Media or Campus Services requests

Will Campus Safety be required at your event?

Yes

No

SETUP

Lecture

Open U

Closed U/Conference

Banquet

Empty Room

As Is (Classroom)

Other (please provide diagram on separate sheet of paper)

Submitted by _____ Date _____

Advisor's Signature _____ Date _____