*Please type*
Name of Organization: ___________________________________________________________

Activity: _________________________ Date: _______________ Time: ______-______

Purpose/Type of Activity:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Location: _________________________ Admission/Cost to Participate_________________

Is this event open to the University public?   Yes   No

Do you wish to have this event in the calendar?   Yes   No

Special Arrangement/Request:
______________________________________________________________________________
______________________________________________________________________________

Name of Person in Charge of Activity E-mail Address Mailbox# Telephone No.

______________________________________________________________________________

______________________________ ______________ ________ ____________
Name of Person in Charge of Activity E-mail Address Mailbox# Telephone No.

____________________________
President’s Signature Date

____________________________
Advisor’s Signature Date

CHECKLIST: (please make sure that these things are in place)
- Cleaning/Security Deposit
- Check Requisition(s) to cover expenses
- Alcohol Permission request
- List of students participating for Walk-A-Tons

Name of Police Officers:
Name                       Phone #        Name                       Phone #

DO NOT WRITE BELOW THIS LINE
______________________________________________________________________________

- UVI Security Officer
- ice
- cooler___
- table cloth____
- cash pan____
- table____

Approved:    Yes   No    Comments: ______________________________________
______________________________________________________________________________
______________________________________________________________________________

_______________________      ________        ______________________________________
Student Activities Supervisor Date

*Please walk with this form and contact security at x4444 before to open and after the event to secure the site*

cc: Security, Physical Plant, Custodial, Media Center, Cafeteria

UVI Student Activities: Revised Fall 2005