Event Registration Form
Office of the Dean of Students and Campus Life

Updated 7/19/04

Organization:_____ Event:_____

Date(s):_____ Time(s):_____ Location:_____

Open to all-campus?_____ Estimated attendance:_____ Will there be food?_____

For Fundraisers, indicate type: Activity(bake sale, etc.)_____ Donation_____

If Traveling, please complete the following: One-way distance_____ Overnight?_____

Transportation (personal, Belmont, etc.):_____

Any student organization that is traveling as a Belmont University recognized organization must have a Belmont faculty or staff member with them if they are staying overnight or if the distance is 150 miles or more one way.

Address:

_____

_____

_____

Phone:_____

Description (concert, lecture, meeting, fundraiser*, conference, retreat, etc.):_____

_____

_____

_____

*For Fundraisers, describe activity or identify the business for donation/sponsorship and what you are requesting.

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We have read The Bruin Guide and the Student Leader Handbook, and we agree to abide by all policies and procedures listed therein as well as all other Belmont policies. We understand that failure to obey Belmont policies may result in the loss of status as a recognized organization.

_____ _____

Contact Printed Name *Phone* *Adviser's Printed Name (if student org.)*

_____ _____

Contact Signature *Adviser's Signature (if student org.)*

Return this form to the Office of Campus Life on the 2nd floor of the Beaman Student Life Center.

Phone #: 460-6407 Fax #: 460-6497 Email: deanofstudents@mail.belmont.edu

Office Use Only

Date Received:_____ Approved/Not Approved_____

Notes: