

APPLICANT

The applicant will be responsible for all fees and charges that are incurred because of the event. Please provide a billing address.

GROUP STATUS

University Department – Any department that is under the University of Utah umbrella.

Official Class Activity – Any event that is supervised by appropriate University personnel related to a class taken here at the University of Utah.

University Sponsored Group – A group that is sponsored and overseen by a department of the University of Utah.

Non-University Group – Any group that is not a department of the University of Utah.

ASUU Registered Student Group – Any student group that is registered with the Associated Students of the University of Utah (ASUU).

Other Student Group – Any student group that is not registered with the Associated Students of the University of Utah (ASUU).

PERSON IN CHARGE

1. Identify yourself to event participants as the person who is in charge of this event.
2. Free yourself from other specific duties so you are able to generally manage all aspects of the event.
3. Keep a charged cell phone with you at all times.
4. Maintain emergency response and facility maintenance phone numbers.
5. Be available to handle all emergency situations such as accidents, spills on the floor and unruly participants.
6. Be prepared to provide first aid to injured persons.
7. Be prepared to conduct emergency evacuation if necessary.
8. Provide reasonable accommodations to persons with disabilities.
9. Answer questions regarding drinking water, access to rest rooms, parking, etc.
10. Be prepared to cancel outdoor events in case of threatening weather or lightning.
11. Comply with applicable food handling guidelines, noise ordinances, etc.
12. Clean-up following the event.

ORGANIZATION

This is the organization that is putting on the event. If you are a student group, you would put your student group's name here. The organizations billing address must be filled out.

EVENT INFORMATION

- List the dates and times that you are requesting. Keep in mind to include your set up and break down time for your event.
- List any building and room preferences for this event.
- List any tables, tents, signs, or equipment that you will be setting up.
- If you are serving food in the **approved areas** your food must be handled by someone that has a valid food handler's permit. All food handling permits must be current and on-scene during the event should the Health Department choose to inspect. Please refer to the University of Utah Food Handling Guide (<http://d2vxd53ymoe6ju.cloudfront.net/wp-content/uploads/sites/4/20161006152842/Food-Handling-at-Campus-Events-092016.pdf>).
- If a Guest Speaker/Lecturer is not from the University of Utah, and is being paid by the University of Utah, a form must be completed with Accounts Payable. If the Guest Speaker is not from the University of Utah, and is not being paid by the University of Utah, a form must be filled out with the Scheduling Office. The form can be found at: <https://riskmanagement.utah.edu/documents/forms/quest-lecture-final-revision.pdf>

CERTIFICATE OF INSURANCE

A Certificate of Liability Insurance may be required for your group. Certificate must be in the minimum amount of one million dollars and list the University of Utah as additionally insured. Please indicate whether your group is able to provide insurance.

FEES

Fees may apply depending on event type, size of facility, and if admissions/donations are collected. Here is a list of services that may include fees:

- Use of Instructional Media Equipment or Technician
- Special Custodial Services
- Public Safety Services
- Filming or Photography
- Pyrotechnic Displays Assessment and Approval

APPLICANT INFORMATION	Today's Date		Applicant Name:			Phone:		Fax:		
	Billing Address:			City:	State:	Zip:	Email:			
	Group Status: Insurance may be required with a minimum amount of \$1,000,000 listing the University of Utah as an additional insured.									
	<input type="checkbox"/> ASUU Registered Group		<input type="checkbox"/> University Department		<input type="checkbox"/> Official Class Activity		<input type="checkbox"/> University Sponsored Group		<input type="checkbox"/> Non-University Group	<input type="checkbox"/> Other Student Group
	Onsite Contact / Person-In-Charge:			Position:			Cell Phone (must be on you during the event):			
	Applicant Organization Name:			Phone:		Website:				
	Address:			City:	State:	Zip:	Email:			
	University Department sponsoring the event:			Name of Department Staff:			Email:			
Signature of Department Staff:					Date:		Phone:			
EVENT INFORMATION	Food is not allowed in classrooms. Alcohol is not permitted on campus. Cancellations must be at least 24 business hours before event to avoid fees.									
	Event Title:									
	Dates:	Start Time:	End Time:	Building / Area Preference:	Room Preference(s):	Structures (canopy, tables, equipment):				
	Event Details: (please attach an email or fax with more details, such as site maps, schedule of events, agenda, flyer, etc. if needed):									
	Crowd Type:		Age Group:		Estimated Size:		Event Advertising:		Other:	
	<input type="checkbox"/> University Students		<input type="checkbox"/> 17 and younger		<input type="checkbox"/> 5 - 40 <input type="checkbox"/> 101 - 150		<input type="checkbox"/> Banner Poles <input type="checkbox"/> Invitations		Admission Charged: <input type="checkbox"/> No <input type="checkbox"/> Yes	
	<input type="checkbox"/> University Staff		<input type="checkbox"/> 18 and older		<input type="checkbox"/> 41 - 75 <input type="checkbox"/> 151 - 250		<input type="checkbox"/> Flyers <input type="checkbox"/> Web Ads		Donations Collected: <input type="checkbox"/> No <input type="checkbox"/> Yes	
	<input type="checkbox"/> Alumni		<input type="checkbox"/> Mixed Ages		<input type="checkbox"/> 76 - 100 <input type="checkbox"/> OVER 250		<input type="checkbox"/> Chronicle <input type="checkbox"/> Other (Specify-)		Items Sold: <input type="checkbox"/> No <input type="checkbox"/> Yes	
	<input type="checkbox"/> General Public						<input type="checkbox"/> Lawn Signs		Items Given Away: <input type="checkbox"/> No <input type="checkbox"/> Yes	
	Will you be providing a copy of a certificate of insurance in the amount of \$1,000,000 listing the University of Utah as an additional insured? <input type="checkbox"/> No <input type="checkbox"/> Yes									
Will you be serving food? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes provide a menu, and copy of a food handler's permit or list name of licensed caterer you are using:										
Guest Speaker/Lecturer:		Name:		Organization:		University Faculty/Staff <input type="checkbox"/> No <input type="checkbox"/> Yes		Is the University paying the Guest Speaker or Lecturer: <input type="checkbox"/> No <input type="checkbox"/> Yes		
ADDITIONAL SERVICES	Fees will apply. For current pricing of all services please contact the Scheduling Office at (801) 581-7854.									
	Police/Security? <input type="checkbox"/> No <input type="checkbox"/> Yes			Number of officers present _____			Event Rentals:			
	Additional Custodial Services? <input type="checkbox"/> No <input type="checkbox"/> Yes						For on-campus event rentals, all requests must be made through Meghan McCarron at 801-581-8518. Will you be renting additional equipment (tables, chairs, tents, garbage cans/removal, etc.)? <input type="checkbox"/> No <input type="checkbox"/> Yes			
	Will you be hauling your own trash to an outside dumpster?(\$31/hr if no) <input type="checkbox"/> No <input type="checkbox"/> Yes									
	Electronic Equipment? <input type="checkbox"/> No <input type="checkbox"/> Yes			<input type="checkbox"/> Data Projection <input type="checkbox"/> Microphone <input type="checkbox"/> Outdoor Power Supply						
	Guest parking accommodations? <input type="checkbox"/> No <input type="checkbox"/> Yes			http://commuterservices.utah.edu/campus-parking/visitors.php						
Sidewalk access for vehicles? <input type="checkbox"/> No <input type="checkbox"/> Yes			http://commuterservices.utah.edu/permit-types/sidewalk-access/index.php			Are you planning on using chemicals in a demonstration? <input type="checkbox"/> No <input type="checkbox"/> Yes				
Scheduling Office Use:	Do not write below this line.									
	Notified:	<input type="checkbox"/> RM	<input type="checkbox"/> Public Safety	<input type="checkbox"/> EHS	<input type="checkbox"/> Facilities & Grounds	<input type="checkbox"/> CDC	<input type="checkbox"/> IMS	<input type="checkbox"/> Other	Date _____	
	Approved:	<input type="checkbox"/> RM	<input type="checkbox"/> Public Safety	<input type="checkbox"/> EHS	<input type="checkbox"/> Facilities & Grounds	<input type="checkbox"/> CDC	<input type="checkbox"/> IMS	<input type="checkbox"/> Other	Date _____	
	Waiting:	<input type="checkbox"/> Structures Permit		<input type="checkbox"/> Lecture Agreement		<input type="checkbox"/> Insurance		<input type="checkbox"/> Food Handler's Permit		<input type="checkbox"/> All Rcvd - Date _____
Contract:	<input type="checkbox"/> Sent to applicant: - Date _____			Scheduler:			Final Contract Received: - Date _____			