



# REGISTRATION: EVENT ON CAMPUS

**TO BE COMPLETED BY THE STUDENT EVENT COORDINATOR**

Sponsoring Group(s)/Organization \_\_\_\_\_

Title of Event/Activity \_\_\_\_\_

Date of Event \_\_\_\_\_ Start Time \_\_\_\_\_ End Time \_\_\_\_\_

Description of Event \_\_\_\_\_  
\_\_\_\_\_

Purpose of Event \_\_\_\_\_  
\_\_\_\_\_

Room Request \_\_\_\_\_

Set up needed (if any) \_\_\_\_\_

Unless instructed otherwise, notice of this event – once approved and scheduled - will be:

1. Posted on the BVCTC website calendar
2. Included in the "WEEK AT A GLANCE" flyers distributed on campus
3. Included in the "What's happening in STUDENT LIFE" email sent every Sunday from the Office of Student Life
4. Included as an announcement in the weekly Student Life e-newsletter
5. Included in the weekly CONNECTION email sent to faculty and staff from the President's Office every Monday

Please note: If you would like to create a flyer for this event to be posted on the Digital Marketing System (TVs), please email it to [OfficeOfStudentLife@bridgevalley.edu](mailto:OfficeOfStudentLife@bridgevalley.edu) or [Rachel.Harper@bridgevalley.edu](mailto:Rachel.Harper@bridgevalley.edu) for approval.

By signing below, I accept responsibility for this event with the understanding that

- I, and my organization, understand that I am to complete an After-Action Form within 2 weeks of the event.
- I, and my organization, am responsible for the actions of the guests at this function (if applicable).
- I am responsible for being present throughout the event (if applicable).
- I am to ensure that the event is in compliance with all rules and regulations pertaining to building and facilities use.
- It is the sole responsibility of the organization to collect and deposit monies into an appropriate student organization account (if applicable).
- Flyers created to be distributed off campus must first be approved by the Director of Student Life.

**Student Event Coordinator**

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

College email \_\_\_\_\_@my.bridgevalley.edu Phone \_\_\_\_\_

**Advisor**

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_