

**Registration: FUNDRAISER OFF CAMPUS** 

TO BE COMPLETED BY THE STUDENT EVENT COORDINATOR

| Sponsoring Group(s)/Organization       |            |          |  |
|--|------------|----------|--|
| Title of Event/Activity                |            |          |  |
| Date of Event                          | Start Time | End Time |  |
| Location of Event, including address _ |            |          |  |
| _                                      |            |          |  |
| Description of Event                   |            |          |  |
|  |            |          |  |
| Purpose of Event                       |            |          |  |
|  |            |          |  |

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 Service 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 <u>OfficeOfStudentLife@bridgevalley.edu</u> or <u>Rachel.Harper@bridgevalley.edu</u> for approval.

CONTINUE ON BACK PAGE



## **Office of Student Life**

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

- I, and my organization, understand that I am to complete Reconciliation Form within 5 days of the event.
- I, and my organization, am accountable for the actions of the guests at this function (if applicable).
- I am required to be present throughout the event (if applicable).
- 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                  |  |
|--------------------------|----------------------------|--|
|                          | @my.bridgevalley.edu Phone |  |
| Date                     |                            |  |
| Advisor                  |                            |  |
| Name                     | Signature                  |  |
| Date                     |                            |  |
| Director of Student Life |                            |  |
| Name                     | Signature                  |  |
| Date                     |                            |  |
| Dean of Students         |                            |  |
| Name                     | Signature                  |  |
| Date                     |                            |  |