



# TRI-COUNTY COMMUNITY COLLEGE

## Event Registration Form

### EVENT DETAILS

Event Name: \_\_\_\_\_

Event Location: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Title: \_\_\_\_\_

**Event Type:**

- |   |  |  |                                     |
|---|--|--|-------------------------------------|
| <input type="checkbox"/> Banquet              | <input type="checkbox"/> College Fair            | <input type="checkbox"/> Exhibition              | <input type="checkbox"/> Fundraiser |
| <input type="checkbox"/> High School Function | <input type="checkbox"/> Movie Night             | <input type="checkbox"/> Multi-Media Performance | <input type="checkbox"/> Open House |
| <input type="checkbox"/> Reception            | <input type="checkbox"/> Spoken Word / Open Mic. | <input type="checkbox"/> Theatrical Performnce   |                                     |
| <input type="checkbox"/> Other: _____         |  |  |                                     |

Is this part of an Academic Program?       YES       NO      If so, what program?: \_\_\_\_\_

Expected Noise Level:       Quiet       Moderate       Loud

Event Date: \_\_\_\_\_      Alternate Date / Rain Date: \_\_\_\_\_

Time Event Starts: \_\_\_\_\_      Time Event Ends: \_\_\_\_\_

**Please tell us if you need the following:**

- |   |  |
|---|--|
| <input type="checkbox"/> Extra time prior to the event for set-up | <input type="checkbox"/> Extra time after the event                        |
| _____   | _____  |
| <small>Please indicate the time you would like to set-up.</small> | <small>Please indicate the time you anticipate the event to close.</small> |

**Additional Event Details** (Please indicate performer name, band name, and any other additional information about the event.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PUBLICITY** (Publicity materials **MUST** be requested three weeks prior to the event. Please submit at Publication Request Form.)

Have you filled out a Publication Request Form?:  YES       NO      If so, date of form?: \_\_\_\_\_

How do you want this event publicized:       Flyer/Handout       Social Media       Website       Newspaper

Email       Direct Mail       On Campus Only       Photography

I know who my target audience is.:       YES       NO      If yes, please provide the list to the marketing.

I need help identifying my target audience.:       YES       NO      If yes, please plan to meet with marketing to discuss.

## EQUIPMENT NEEDS

- 5' Tables       Round       Long      How many?: \_\_\_\_\_
- 8' Tables       Round       Long      How many?: \_\_\_\_\_
- Table Cloths      How many?: \_\_\_\_\_
- Chairs      How many?: \_\_\_\_\_
- Trash Cans      How many?: \_\_\_\_\_

If you require a specific set-up, please attach a sketch and/or description of your set-up.: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you need assistance with designing your event set-up?:     YES     NO

I will need:     Sound System     Media     Special Power Accommodation     SmartBoard  
 Wi-Fi     Decor     Assistance with Set-Up

## FOOD AND BEVERAGE

Will this event be catered?:     YES     NO    If yes, from where?: \_\_\_\_\_

Do you need assistance with food?:     YES     NO

Do you have a food budget?:     YES     NO    If yes, how much?: \_\_\_\_\_

Tell us more about the menu you would like for this event.: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## VOLUNTEERS

I need help with this event.:     YES     NO    If yes, how many?: \_\_\_\_\_

## SIGNATURE

By signing and submitting this form, you are requesting that the Events Committee review and approve your event. It is critical that all events are planned in advance and the Events Committee should be informed at least six weeks in advance. If this is a large event that requires outside promotion, the Events Committee should be informed eight weeks in advance. **Please return this form to Tracy Foster on the Main Campus in Peachtree.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Date: \_\_\_\_\_