Student Activities Committee Checklist

All College Activity Boards and Programs must have Club and/or SGA Adviser approval two (2) weeks before event.

This form can be completed on your computer using the free <u>Acrobat Reader</u>. When finished, click the "Submit" button to open your browser's e-mail client to send the form to the Director of Student Services. If your computer is not set up to send e-mail, use the "Print" button and send a copy, attaching all supporting documentation, to: SGA Coordinator, Silver Creek Campus, PO Box 610, Holbrook AZ 86025.

ACTIVITY INFORMATION:		
Activity Date:	Start Time:	End Time:
Sponsoring Organization:		
Contact Name:	Phone:	E-mail:
Activity Title:		
Activity Description:		
VENUE:		
Location/Building:		Room/Area:
Facility Held/Reserved: 🗆 Yes 🗖 No	What Audio-Visual is needed?	
LOGISTICS:		
How is activity being publicized?* Posters/Fliers How is activity being publicized?*	Kiosks □ NPC Website □ Facebook □	Twitter 🗆 Radio 🗆 Newspaper
FUNDING & MONEY:		
Is this activity a fundraiser? \Box Yes \Box No What is the source of funding?		
Will sales of any sort be part of this activity? \Box Yes \Box No \Box Is there co-sponsorship with another organization? \Box Yes \Box No		
If Yes, what will be sold?	If Yes, what organization(s)?	
	organization(3):	
EVENT MANAGEMENT:		
Will there be amplified outdoor sound? \Box Yes \Box No \Box Is this activity potentially controversial? \Box Yes \Box No		
Is the activity very popular? \square Yes $ m No$	Has this activity been widely publicized off-campus? \square Yes $\ \square$ No	
Is there admission or ticketing? \Box Yes \Box No	Does activity require a security or event man	agement plan? 🗆 Yes 🗖 No
RISK:		
Is there local transportation involved in this activity? \Box Yes \Box No	Is there other travel involved in this activity? \Box Yes \Box No	If Yes, to where?
Is there physical activity that may pose a risk to participants? $\Box \; Yes \; \Box \; No$	Is the event taking place off-campus? $\hfill\square Yes \hfill \square No$	
		FOOD & BEVERAGE:
Will food/beverage be served at this activity? \Box Yes \Box No What is the source?		
What food will be provided?		

Print a copy for your records **before** submitting via e-mail.

* Posters/fliers must be approved by NPC M&PR prior to printing/distribution.

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