

PAUL QUINN

EVENT REQUEST FORM & FACILITIES USE TOOLKIT

Individuals and/or organizations (external, internal and those seeking in-kind services/usage) interested in hosting an event and/or using Paul Quinn College campus facilities are **required** to complete the attached, applicable forms. The completed forms for an approved event shall serve as a binding agreement between individuals and/or groups hosting the event and Paul Quinn College. **Internal and external groups must submit a completed toolkit for approval at least 14 days in advance of the date in which they are requesting the event to be held.** When filling out this form, please note that all fields are required.

Note to Students/Student Groups: Before completing this form, please review the sections of the Student Code in the Student Handbook associated with the use of campus grounds, clean-up responsibilities, security requirements and the Event/Facilities Usage Policies and Procedures (included in this form) and submit the toolkit to the CEEL office for preliminary approval.

Note to External Groups: following receipt of this form, you will receive a cost estimate for review and approval. All external individuals, groups, and organizations **must** furnish Paul Quinn College with a Certificate of Insurance against liability for personal injury or property damage for \$5,000 per person and \$1,000,000 per occurrence **upon approval of event**. Insurance Certificate MUST name Paul Quinn College as an **“additional insured party and loss payee.”**

Event Organizer Information

The person indicated below should serve as the College's primary point of contact and will be responsible for all aspects of the event.

First & Last Name of Event Organizer:	Event Organizer's Title:
Event Organizer Phone Number:	Event Organizer E-mail Address:
Mailing Address:	

Event Information

Event Name:	Host Individual/Organization Name:
Proposed Event Date(s):	Alternate Event Date(s):
Proposed Event Start & End Time:	Expected Number of Attendees:
Host/Organization Type <input type="checkbox"/> Faculty/Staff <input type="checkbox"/> Campus Department <input type="checkbox"/> Student Organization <input type="checkbox"/> Paul Quinn Alumni <input type="checkbox"/> Bishop College Alumni <input type="checkbox"/> External Non-Profit Organization <input type="checkbox"/> External For-Profit Organization <input type="checkbox"/> Other: _____	
Please pick one: <input type="checkbox"/> Public Event <input type="checkbox"/> Private Event <input type="checkbox"/> Other: _____	
Alumni Only Are you a dues paying Paul Quinn Alumni Association Member? Y <input type="checkbox"/> N <input type="checkbox"/> What Year did you graduate? _____ If yes, which association are you a member of? _____	
Purpose of Event <input type="checkbox"/> Career (e.g. job fair) <input type="checkbox"/> Community (e.g. food giveaway) <input type="checkbox"/> Conference/Convention <input type="checkbox"/> Political Event <input type="checkbox"/> Religious Service <input type="checkbox"/> Social (e.g. dance) <input type="checkbox"/> Other: _____	

Event Description

Please provide a brief description about your event. Description should not be longer than 4 sentences.

Event Details

Set-Up Time:	Actual Event Start Time:
Break Down/Clean Up Time:	Actual Event End Time:
Venue Request <input type="checkbox"/> Adams Auditorium <input type="checkbox"/> Cafeteria <input type="checkbox"/> Carrington Lab <input type="checkbox"/> Chapel Lawn <input type="checkbox"/> Classroom(s); if needed, indicate quantity: _____ <input type="checkbox"/> Grand Lounge <input type="checkbox"/> Health and Wellness Center <input type="checkbox"/> SUB Patio <input type="checkbox"/> Richard Allen Chapel <input type="checkbox"/> Tiger's Den Gymnasium <input type="checkbox"/> Trammell S. Crow Living and Learning Center Special Services Will you need any special services/accommodations for people with disabilities? If so, please describe below:	Auxiliary Services & Rentals <input type="checkbox"/> 5-Foot Round Tables; if needed, indicate quantity: _____ <input type="checkbox"/> 6-Foot Rectangular Tables; if needed, indicate quantity: _____ <input type="checkbox"/> Chairs; if needed, indicate quantity: _____ <input type="checkbox"/> Table Linens; if needed, indicate quantity: _____ <input type="checkbox"/> Pipe and Drape; if needed, indicate quantity: _____ <input type="checkbox"/> Stage/Platform; if needed, indicate quantity and size: _____ <input type="checkbox"/> Podium; if needed, indicate quantity: _____ <input type="checkbox"/> Cordless Handheld Microphone; if needed, indicate quantity: _____ <input type="checkbox"/> Lapel Microphone; if needed, indicate quantity: _____ <input type="checkbox"/> Standing Microphone; if needed, indicate quantity: _____ <input type="checkbox"/> Tabletop Microphone; if needed, indicate quantity: _____ <input type="checkbox"/> Portable PA System; if needed, indicate quantity: _____ <input type="checkbox"/> Projector; if needed, indicate quantity: _____ <input type="checkbox"/> Projector Screen; if needed, indicate quantity: _____ <input type="checkbox"/> Laptop; if needed, indicate quantity: _____ <input type="checkbox"/> Shuttle Services; if needed, indicate quantity: _____
Note: Paul Quinn College will only provide what is already in stock. Any items exceeding what is readily available will need to be rented from an external vendor with costs incurred by the event host. All events using AV/Tech are required to have a Paul Quinn College technician on-site. All after hour events with more than 50 people will be required to have security present. An estimate of costs for all items selected above will be presented to the event host following submission of this form for review.	

Food & Catering

If you are requesting Paul Quinn food and catering services, please complete the sections below.

Type of Service <input type="checkbox"/> Break <input type="checkbox"/> Buffet Service <input type="checkbox"/> Served Meal <input type="checkbox"/> Reception <input type="checkbox"/> Drop Off <input type="checkbox"/> Cafeteria Type of Service Ware <input type="checkbox"/> Plastic (upscale plastic) <input type="checkbox"/> China	Payment Method <input type="checkbox"/> Budget Code <input type="checkbox"/> Credit Card <input type="checkbox"/> Check Linen Needs <input type="checkbox"/> 6ft tables ____ <input type="checkbox"/> 8ft tables ____ <input type="checkbox"/> 5ft rounds (120) ____ Color: _____
Note: Paul Quinn College will only provide what is already in stock. Any items exceeding what is readily available will need to be rented from an external vendor with costs incurred by the event host. An estimate of costs for all items selected above will be presented to the event host following submission of this form for review.	
<p>If you are requesting Paul Quinn food and catering services, please describe needs in detail below:</p> <p>Meal(s):</p> <p>Dessert(s):</p> <p>Beverage(s):</p> <p>Set up Instructions:</p> <p>Note: Aladdin Food Services require a minimum one-week advanced notice for menu selections. Additional charges will apply and will be quoted separately from facilities use estimate. If food service providers other than Aladdin Food Services are used, additional agreements, liability insurance and ServSafe Certifications may be required. Some established retail restaurants are not required to provide this information.</p>	

Room Set-Up

Using the reference pictures to the right, please provide an detailed description of your preferred room set-up for each requested space (if applicable).

Space 1: _____

Set-Up Description:

Space 2: _____

Set-Up Description:

Space 3: _____

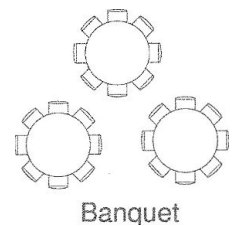
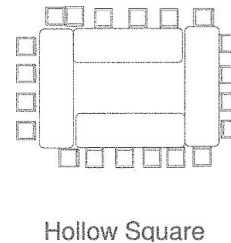
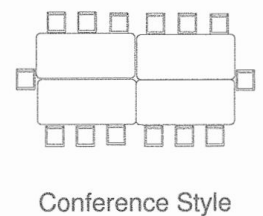
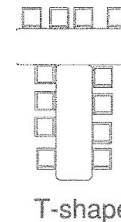
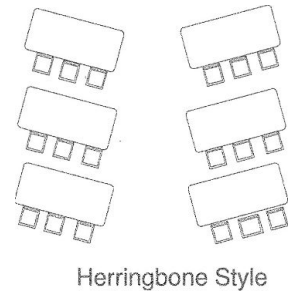
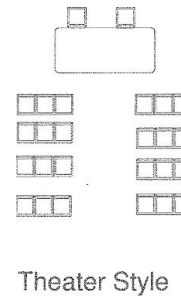
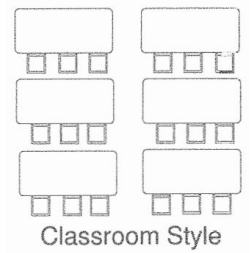
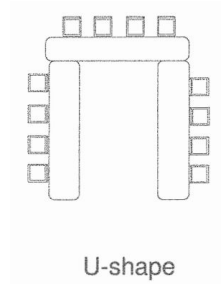
Set-Up Description:

Space 4: _____

Set-Up Description:

Space 5: _____

Set-Up Description:



Event Agreement

☐ I/We, understand that as a sponsor(s) of this activity and/or group we are/I am accepting responsibility for the actions, activities, and property of these persons.

☐ I/We, also understand that this form is solely to facilitate administrative procedures and in NO manner does it represent endorsement or support of the described activities or products by the College or its employees.

☐ **STUDENTS:** I/We have reviewed the applicable sections of the Student Code in the Student Handbook that deal with the use of campus grounds, as well as the **Event/Facilities Usage Policies and Procedures** and have carefully read, fully understand, and agree to abide by those policies. I/We understand that we must have a Paul Quinn College faculty/staff member present at our event and that my/our advisor must approve of this event.

☐ **EMPLOYEES:** I/We have reviewed the **Event/Facilities Usage Policies and Procedures** and have carefully read, fully understand, and agree to abide by those policies.

☐ **ALL INTERNAL GROUPS:** I/We understand and agree, that in exchange for the use of the College facilities at no charge, our group will be responsible for assisting with the set-up and tear-down if requested, clean-up and trash removal, and restoring the venue to the condition it was in prior to our event. In addition, if our group is charging an admission fee or selling tickets for guests to attend the event, our organization will be charged the standard fees for the venue, set-up, tear-down, clean-up, trash removal, and use of audio/visual equipment.

☐ **SECURITY FOR INTERNAL GROUPS:** I/We understand and agree, that the requirement for security personnel for internal group events will be at the sole discretion of the leadership of the college. If this toolkit is for a legitimate group meeting, organizational meeting, study session, etc., the requirement for security personnel **may be** reduced or eliminated. If the event evolves into a larger than specified number of participants or is actually a cover for a party or other unsanctioned event, the event is subject to being shut down and disciplinary action may be taken on the individuals, or groups responsible, including sanctions from sponsoring future events.

☐ **SECURITY FOR EXTERNAL GROUPS:** I/We understand and agree, that the requirement for security personnel for external group events will be at the sole discretion of the leadership of the college and is non-negotiable. Should the external group refuse to pay for security deemed necessary by the College, the event will not take place.

ALL EVENT ORGANIZERS:

Event Organizer Signature:	Date Submitted:
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STUDENT GROUPS ONLY:

Faculty/Staff Advisor Approval of Event

Faculty/Staff Advisor Signature:	Faculty/Staff Advisor Name:
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Faculty/Staff Member Supervising Event

Faculty/Staff Signature:	Faculty/Staff Name:
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FOR PAUL QUINN EVENT COMMITTEE USE ONLY:

Documents

- ☐ Event Estimate Created & Sent
- ☐ Signed Waiver of Liability Received on: _____
- ☐ Proof of Insurance Received on: _____
- ☐ Proof of ServSafe Food Safety Certification Received on: _____ (only if required from outside vendor)

Payments

- ☐ Deposit Received: \$ _____ Date Paid: _____
- ☐ Final Payment Received: \$ _____ Date Paid: _____

Form Last Updated: February 4, 2022