

# **Event Request Form**

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| **Last Name:** |  |
| **Forename(s)** |  |
| **Telephone Number:**  **E-mail:**  **Student Number:** |  |

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| Event Details (If other please provide details) |
| **Event Category**: **Indoor**  **Outdoor**  **Both**   **Other**  …………………………………………………………………………………………………………………………………………………………… |
| **Event Name (please provide a meaningful name):** |
|  |
| **Event Description: (please provide a description of the Event for which this application is made)** |
| **Is this event to be repeated on another day? Yes**  **No** |
| **Event start time (HH:MM):**       **Event end time (HH:MM):**  **Event start date (DD/MM/YYYY):** Click here to enter a date.  **Event end date (DD/MM/YYYY):** Click here to enter a date. |

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| **Telephone Number:**  **E-mail:**  **Student Number:** |  |

**Coordinator/organiser** refers to the member of university staff or student who is the primary point of contact for all practical and logical arrangements pertaining to the event, for example, booking the room and outlining the guest speaker details, as well as the associated risk assessment. The person is also expected to be present throughout the event. This might be different to the person making the request because they might not be able to attend the event.

Please fill this information in even if you are the same person making the request.

**Sponsor** - Member of staff responsible for the event and risk assessment. **To be completed by Union Staff**

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**Please give detail of the type of event you are requesting.**

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| Indoor Event Location (Please Select from drop down menu) |
| |  |  |  | | --- | --- | --- | | **Campus** | **Building Name** | **Room** | | Choose an item. | Choose an item. |  | |
| Outdoor Event Location (Please Select from drop down menu) |
| |  |  | | --- | --- | | **Outdoor location** | **Description** | | Choose an item. |  | |
| Other event location |
| |  |  |  |  | | --- | --- | --- | --- | | **Name** | **Address** | **Town City** | **Post Code** | |  |  |  |  | |
| **Any Additional Information:** |

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| Number of people attending |
| Aston Students:  Non-Aston Students: |
| **Involvement of outside organsation** |
| YES  NO  If YES then please give details:  **Name of organisation:**  **Name of contact:**  **Email:**  **Telephone Number:** |
| **Is there a visiting speaker involved?** |
| YES  NO  If YES then please fill in an External Speaker Form. |
| When completed this form will need to be authorised:   1. *Student’s Union authorisation…..........................................................* |