**Campus Event Intake Form for events in the UC**

**Please fill out this form before you call or meet with our office about your next large event. Providing as much information as possible will help your event be successful.**

Student Group/Department Sponsoring the Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Contact: \_\_\_\_\_\_\_

Email Address:

Phone Number:

Name and Email of President of ASUM Organization and Advisor (if applicable):\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date (s) of event:

Event Start Time: Event End Time: \_\_\_\_\_\_\_\_\_\_\_\_\_

Times you need in the room for set-up and breakdown:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Event Type (special event, meeting, luncheon):

Event Title:

Set-Up Preferences (lecture, round tables):

Equipment needs (chairs, tables, flip chart, etc): \_\_\_\_\_\_

Technical needs (PowerPoint, video, microphone):

Catering: (Yes, No) If yes, got to www.umt.edu/sa/uds to look at menu items and prices.

Will you be charging at the door? (Yes, No)

Who is your primary audience? (Public, Campus, Students)

Will you have music or amplified sound at your event? (Yes, No)

Review decoration policy? (found on website) (Yes, No)

Method of Payment? (cash, check, credit card or index code)

**Event Planning Office (406) 243- 4113**

**University Center Rm. 340**