Medgar Evers College of City of University of New York <u>REGISTERED STUDENT CLUB, ORGANIZATION, & ASSOCIATION SPACE APPLICATION</u> <u>Submit six (6) weeks prior to proposed event to the Office of Student Life & Development</u>

It is the responsibility of the student group requesting space to understand and comply with the following:

Please note that event space is contingent upon availability and subject to change. Filling out an application does not imply approval. <u>All</u> requests for space must be submitted in writing using the <u>Registered Student Club, Organization & Association Space Application</u>. Your room/space reservation is not finalized until you have received written or electronic confirmation from Space Reservations.

Flyer draft (and ticket draft if applicable) must be attached when submitting an application

NOTE: Only Typed Space Reservation Forms Will Be Accepted

 Sponsoring Group Information (All contact information should mirror the signatories on the latter part of the Space Reservation Application):

Student Club/Organization Name: MEC E-mail Address:			Primary Exec. Contact Name:				Advisor Name Print :		
			Phone #			Advisor Contact number :			
Di	/Assistant Dir. of Student Li	Secon Name:	Signature: Secondary Exec. Contact Name:			MEC E-mail Address:			
Signature:		Phone	Phone #			Signature:			
		Signat							
 2. __	Proposed Date & Location of 1st choice		4. D. 6		T (IN)	TP 4	C4 4 TPS	E (E 1/E)	
-	Day & Date	Room(s) /Area/Lo	cation Preference	ce	Total Number of Attendees	Event	Start Time	Event End Time	
	2 nd choice Day & Date								
-	3 rd choice Day & Date								
ac	Facilities Available Unless authorized lity hitheater	Limited A d, the piano is off limits a Building Bedford	and due to its fr Capacity	agility, ca Facili		lo ballooi	ns allowed i Building AB-1	n Auditorium Capacity 144 (standing)/117(sea	
	ident's Conference Center	Bedford		Cafeteria /Main Dining Room			AB-1	332(standing) /246(seat	
	sroom	Bed/Car		Mary Pinkett Lecture Hall (S-12			SBSS	74	
	nan & Miriam B. Johnson Lecti			Conference Room (S-307)			SBSS	24	
	nders Auditorium Inasium	Bedford Carroll	466 272	3 rd Fl. Atrium Patio			SBSS SBSS	75 48	
yn									
ac	ility Setup Requirements:		<u>B</u> Sem	i-Circle	<u>C</u> Tables & Chai	rs (#must	be indicated)	ŕ	
ac	ility Setup Requirements: Type of Event: () Meeting	<u>A</u> Conference/Auditorium () Lecture () Recepti	<u>B</u> Sem	i-Circle	<u>C</u> Tables & Chai	rs (#must	be indicated)	ŕ	
ac	ility Setup Requirements: Type of Event: () Meeting Nature of Planne	<u>A</u> Conference/Auditorium () Lecture () Recepti ed Event d description of activity pla	<u>B</u> Sem	i-Circle Party ()	<u>C</u> Tables & Chai	rs (#must	be indicated)	vent () Conference	

	•	collected, all cash pro	oceeds/collecti	ons must be de	eposited into	the appropriate Stud	dent Faculty Association
	Account at the Bursar's	s Office)					
NOT	E: Events taking plac	ee in AB1 or SBSS will ed to be sold at the d					
	event tickets net	ca to be sola at the a	oor triis iriiori	nation must be	provided a	it icast 4 weeks bero	ic event.
	Will a fee be charged? Advance \$					Advance ticket sa tudent \$	les? ()Yes ()No
	•	clearly state the follow	ving: <u>Valid ID</u>	is required for	admission		nust process all ticket College enforces a Zero
	# Persons Expected to The Requestor agrees no standing room.			= =		UNY Only () Open he number of existing	to Public seats, and there will be
5. Ca	mpus Support Services Indicate below the type services is based availa	e of service needed, p		_	ram if nece	ssary. Please rememl	ber, request for campus
	*Request for services	if not submitted in th	ne allotted tim	e, will receive t	he basic se	etup for confirmed lo	cation.
RE	QUESTS FOR AUDIO/V			REQUEST FOR		•	
	art Cart (LCD Projector,			Podium & Micro			
	crosoft Office)	•	-		-	 e- No. needed	
VC	R & TV					e – No. needed	
VC	R/DVD & TV						
	/Cassette Player					vailable) – No. neede	
	cord Player				=		e) – No. needed
	erhead Projector*			Wired Micropho	ones ** (6 a v	vailable) – No. needed	t
	aque Projector*			Anchor System	I (speaker,	1 microphone) (Bedfo	ord Bldg.)
	mm Projector*			Anchor System	II (speakers,	2 microphones, 1 CD pl	ayer) (S-Bldg.)
	de Projector*					2 microphones) (Car	
3110		o ceroon		Allerior System	iii (Speaker)	2 microphones, (car	1011 3tt Diag./
	*Projectors includ	e screen		**Only	for use in the	e auditorium	
	REQUEST FOR	PUBLIC RELATIONS SI	ERVICES	CUNY Websit	te () Medga	ar Evers Electronic Boa	ird ()
All publ	lic relations services will b			nent for further co	ontact.		, ,
6. Fo	od Vendor/Caterer:	Attach selected v	endor's menu	ı and estimated	l cost and F	Food Handlers Permi	t.
	NOTE : The College will no ught. <i>ALCOHOLIC BEVE</i>						
Space R	Reservation Use Only:						
Арр	roval:	Conf. #:	, Rejected: _		Pending:		
Secu	ırity Requirement:	_ # of Officers,	Supervisory,	, Sign:		Date:	
Othe	er:						

Office of Space Reservations, 1150 Carroll Street, M-4, Telephone No. (718) 270-6005/6116, spacerequest@mec.cuny.edu
Office of Student Life & Development, 1637 Bedford Avenue, S-212, Telephone No. (718) 270-6050, Fax No. (718) 270-6198, studentlife@mec.cuny.edu

electronically five (5) business days before scheduled event.

PLEASE NOTE: Cancellations/changes must be received by the Space Reservations Office and the Office of Student Life