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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **UNDA Student Group Event Form 2019** | | ***Office use only***  **Booking Confirmation:** | | | | | **Date Received:** | | | | |
| **CELCAT No.** | | | | |
| **Outlook Venue Booking:**  Yes  No | | | | |
| **Student Group:** | Notre Dame Student Association | | | | | | | | | | |
| **UNDA Event Contact / Organiser** | Click here to enter text. *Primary Staff / Student organising* *the event*: | | | | | | | | | | |
| **Email:** | Click here to enter text. | | | | | **Phone:** | | Click here to enter text. | | | |
| **Principal Attending UNDA Staff:** | Click here to enter text. *Primary Staff Member* *attending the event:* | | | | | | | | | | |
| **Email:** | Click here to enter text. | | | | | **Phone:** | | Click here to enter text. | | | |
| **Title of Event:** | Click here to enter text. | | | | | | | | | | |
| **Dates:** | Click here to enter text. | | | | | | | | | | |
| **Event Time Start:** | Click here to enter text. | | | **Event Time Finish:** | | | | Click here to enter text. | | | |
| **Set-Up Start:** | Click here to enter text. | | | **Pack Down Finish:** | | | | Click here to enter text. | | | |
| **Preferred Venue(s):** | Click here to enter text. *Contact #2572 for queries / suggestions* | | | | | | | | | | |
| **Co-hosts /Other Institutions Involved:** | Click here to enter text. | | | | | | | | | | |
| **Approx no. of guests:** | Click here to enter text. | | | | | **External Guests Attending?** | | | | | Yes  No |
| **Target Audience:**  (e.g. Staff, Students, Alumni, Community, Donors etc.) | Click here to enter text. | | | | | **VIP Guests Invited:** | | | | | Yes  No |
| **List VIP’s:** Click here to enter text. | | | | | |
| **Event Objectives:** | Click here to enter text. | | | | | | | | | | |
| **Are there contractual agreement(s) that UNDA will enter?** | | | Yes  No | | | *If yes, please attach a copy* | | | | | |
| **Will food/drink be served as part of the event?** | | | Yes  No | | | Click here to enter text. | | | | | |
| **Will alcohol be served as part of the event?** | | | Yes  No | | | **Guests under 18years?** Yes  No | | | | | |
| **Do you have RSA certificate holders serving alcohol?** | | | Yes  No | | | Click here to enter text. | | | | | |
| **Are any additional licenses or insurance costs required?** *(incl. liquor license* | | | Yes  No | | | **Details:** Click here to enter text. | | | | | |
| **RAMP** (if required) | | | Yes  No | | | **Submitted:** Yes  No | | | | | |
| **Projected costs for event:** *Please include registration, advertising, printing, catering, equipment and administration costs.* | | | **$** 0.00 *MUST BE COMPLETED* | | | | | | | | |
| **Which budget line will these costs be attributed to?**  *Please state all budget codes to be used to cover all costs* | | | N/A *MUST BE COMPLETED* | | | | | | | | |
| **DEPARTMENTAL SUPPORT REQUIRED: ONCE EVENT IS APPROVED - EVENT ORGANISER TO CONTACT DEPARTMENTS FOR SUPPORT** | | | | | | | | | | | |
| **Campus Services**  *For room rearrangement, set up, equipment delivery, cleaning etc.*  Yes  No  [fremantle.cseventsupport@nd.edu.au](mailto:Fremantle%20CS%20Event%20Support%20%3cfremantle.cseventsupport@nd.edu.au%3e) | | | | | **Hospitality *(Officer located in Fairweather’s Bar) -*** *For equipment - glassware, tablecloths, urns, catering packs etc.*  Yes  No  [Fremantle.cateringequipment@nd.edu.au](mailto:Fremantle%20Catering%20Equipment%20%3cFremantle.cateringequipment@nd.edu.au%3e) | | | | | | |
| **ITS**  *For laptops, projectors and screens, internet, A/V, TV, microphones etc.*  Yes  No  [Fremantle.IT@nd.edu.au](mailto:Fremantle%20IT%20%3cFremantle.IT@nd.edu.au%3e) | | | | | **Marketing & Communications Office**  *Tick Appropriate Box:*  ***Graphics-*** *Flyers, posters, invitations, advertisements, use of University logo-*[fremantle.graphicdesign@nd.edu.au](mailto:Fremantle%20Graphic%20Design%20%3cfremantle.graphicdesign@nd.edu.au%3e)  ***Media-*** *press releases, coverage of event etc.-* [media@nd.edu.au](mailto:Media%20%3cmedia@nd.edu.au%3e)  ***Guest Lists*** *– VIP, Donor, Alumni and Affiliate database information required.-* [development@nd.edu.au](mailto:UNDA%20Development%20%3cdevelopment@nd.edu.au%3e) | | | | | | |
| **SIGNATURES: MUST BE ATTAINED BEFORE EVENT FORM WILL BE PROCESSED** | | | | | | | | | | | |
| **UNDA Event Contact / Organizer:** | Name | | | | Sign: | | | | Date: | Click here to enter a date. | |
| **Principal Attending UNDA Staff Member** (as applicable): | Name Click here to enter text. | | | | Sign: | | | | Date: | Click here to enter a date. | |
| **School Dean/Student Services Manager:** | Name Click here to enter text. | | | | Sign: | | | | Date: | Click here to enter a date. | |
| ***PLEASE SUBMIT SIGNED FORM AND ANY ADDITIONAL INFORMATION ABOUT YOUR EVENT TO VENUE COORDINATOR: Mia Schaefer-Zaicz (ND6/202)–*** [mia.schaefer-zaicz@nd.edu.au](mailto:mia.schaefer-zaicz@nd.edu.au) ***WHO WILL SEEK FURTHER APPROVAL*** | | | | | | | | | | | |
| **Venue Coordinator:** |  | | | | Sign: | | | | Date: |  | |
| **Executive Director:** |  | | | | Sign: | | | | Date: |  | |
| M:Drive | Fremantle Events Calendar | | | | Email | | | | Summary | | |