

Event Name \_\_\_\_\_

## Columbia College Club Event Form

Club/Organization		Estimated Cost \$	
Advisor(s)		Date of Request	
Event Date	Event Name	Event Location	
Start Time	End Time	Setup Start	Clean Up End
Contact Name & Number			
Type of Event:    Event    Promotional    Fundraiser    Travel    Other, describe			
Special Accommodations:    Yes    No		If yes, please describe	
Faculty Guests		Speaker/Entertainer	
Type of Transportation Requested			
Destination		Departure Date/Time	Return Date/Time
EMS Reservation #		Food Services	
EMS Confirmation (Please attach Reservation Confirmation)		Medical Services	

_____ Club President	_____ Date	_____ Club Advisor	_____ Date
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_____ Program Assistant of Student Success	_____ Date	_____ ASCC Advisor/ Director of O&R	_____ Date
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CASH ADVANCE INFORMATION (If Event Needed)			
Date	Amount	Description	Cash Advance Person- Name & Address

PURCHASE INFORMATION (If Event Needed)			
Date	Amount	Requisition #	Payee/ Vendor- Name & Address

_____ Signed	_____ Date	<i>Received On</i>	<i>By</i>	<div style="background-color: #fff9c4; height: 15px; width: 100%;"></div>
		<i>Submitted On</i>	<i>By</i>	<div style="background-color: #fff9c4; height: 15px; width: 100%;"></div>
		<i>Approved On</i>	<i>By</i>	<div style="background-color: #fff9c4; height: 15px; width: 100%;"></div>
_____ Account Number	_____ Amount	<i>Signed</i>		<div style="background-color: #fff9c4; height: 15px; width: 100%;"></div>

*For Office Use Only*