BAGGINS END & TRI-COOPERATIVE EVENT REQUEST

Name of Event: _________________________________________________________________

Location of Event: __________________________________________________________

Date of Event: _______________________ Starting Time: _____________________ Ending Time: ______________________

Description of the Event (be specific): _______________________________________________________________________________________
_________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________

Number of Participants: Residents: __________________________ Guests: __________________ TOTAL: ________________________

How will guests be invited?  
- Social Media  
- Email Invite  
- Flyer  
- Other (be specific): _________________________________________________________________________

Please provide final copy of the written message, social media post, or flyer.

Please answer the following questions:

YES  NO

Will the event include amplified sound?  
- DJ  
- Recorded Music  
- Live Music  
- Speaker
If yes, you must attach Amplified Sound Permit Request.

Is an open event? If yes, how is event publicized? ___________________________________________________________________________
Attach a copy of all methods with final written text

Will Food/Beverages be served?  
- Buffet  
- Plated Meal  
- Light Refreshments only  
- Other (be specific): __________________________________________________________
If yes, catered by:  
- Self-catered/potluck – Details: ________________________________________________
If Self-Catered/Potluck has more than 75 participants, it requires EH&S inspection.
http://safetyservices.ucdavis.edu/ps/fsph/minimumRequirements

- Approved caterer – Who? _______________________________________________________
List of approved caterers: http://www.cevs.ucdavis.edu/dept_cont/caterers/

- Proposed menu attached

Will alcohol be served to participants 21 and over?
If yes, it is required you have food available at your event & the event cannot be open to public.
How will the alcohol be distributed? ________________________________________________

Will funds be collected?  
- Donations  
- Admission  
- Ticket Sales  
- Dues  
- Other (t-shirts, bake sale, etc.): ________________________________________________
If yes, attach copy of approved fundraiser form from Center for Student Involvement.
http://csi.ucdavis.edu/student-organizations/fundraising/

Are you bringing any off-campus vendors onto campus for your event?
If yes, who? _______________________________________________________________________

Will you have security for your event?
If yes, who? _______________________________________________________________________

Is the event Co-Sponsored? If yes, list the group(s) name: ________________________________

Will there be any theme or decorations at this event? If yes, describe: ____________________________________________________________________

Updated 9/15
RETURN FORM TO SCHA Staff Member

Please print legibly: Event Coordinator: ________________________________________________________________

Cell Phone Number: ___________________________ Email Address: ________________________________________

Submit at least 14 calendar days in advance to the SCHA. Large Scale Events (e.g. fundraisers, concerts, cook-offs, etc.) require a minimum of 45 days advance notice see Event Guidelines for more details.

By signing below, the Event Coordinator indicates that the Baggins End & Tri-Cooperatives Event Guidelines have been read and agreed to. During the event, University and/or SCHA staff shall be permitted to enter the premises to verify compliance with established policies. The UCD Police Department will be notified should assistance be needed to enforce compliance with these guidelines. The Event Coordinator will be at the phone number listed above throughout the event.

_________________________________________________   __________________________________________________
Signature of Event Coordinator   Date

OFFICE USE ONLY

Documentation Included
☑ Invitation written text
☑ Amplified Sound Permit Request
☑ Approved Fundraiser Form
☑ Proposed Menu
☑ Other: ____________________________________________________________________________________________

☑ Approved   ☐ Condition(s): ___________________________________________________________________________

_________________________________________________________________________________
_________________________________________________________________________________

☑ Denied on the basis of: ____________________________________________________________________________

_________________________________________________________________________________

☐ SCHA Staff Signature                Date

☐ Student Housing Staff Signature      Date

Copies to:   ☐ SCHA   ☐ Event Coordinator   ☐ SH   ☐ Police   ☐ Real Estate Services

Updated 9/15