

Weekend Event Grant Application

Instructions:

- Fill out the middle two pages of event grant application and schedule a meeting with CFMEE in the Office of Student Life Programs (115 Farinon).
- We prefer applications be submitted three weeks prior to requested event date.
- The last page of this application is an evaluation that you must fill out following the event.

Event Criteria

- Events must be sponsored by one or more recognized student groups
- Events must occur on Friday or Saturday nights from 11pm-2am
- All events must be open to the entire Lafayette student body
- Event may not be a fundraiser, and no exchange of money may occur in the facility
- · Applications must be submitted at least three weeks prior to the event
- · Dates will be assigned on a first come, first served basis

Contact Information

| Organization(s) Na | me(s) | | |
|------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| Primary Contact | | Secondary Contact | |
| Name | · · · · · · · · · · · · · · · · · · · | Name | |
| Email | | Email | |
| Box # | | | |
| Cell # | | Cell # | |
| | | | |
| | Event I | nformation | |
| Event Title/Theme | | | · · · · · · · · · · · · · · · · · · · |
| Summary of event | | · · · · · · · · · · · · · · · · · · · | |
| | | ···· | |
| | | ···· | |
| | | | |
| | | | |
| Three goals of ever | nt | | |
| | | · · · · · · · · · · · · · · · · · · · | |
| | | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · |
| Publicity plans | | | |
| | | | |
| | | | |
| | Reque | sted Dates | |
| 1 st Choice | 2 nd Choice | 3 rd Choice | |
| | | | |
| Any dates your orga | anization can not sponso | or: | |

What You Get

- Use of The Spot from 10:30pm-11pm for set-up and clean up must occur after event.
- 1 Custodian, 2 Bear Security Officers & 1 Professional Staff
- 1 Student Night Manager & 2 Student Bartenders
- Campus shuttle running from 11pm-2am (Shuttle schedule is available as requested)
- FREE soda, water, "Spot" food (hot food-limited quantities) & unlimited bar snacks
- Access to all games and equipment in the facility
- \$750 for event costs (unused funds will be returned to The Spot budget) There is a maximum of \$200 that can be used for prizes, such as gift cards (subject to approval). Please make sure you itemize this in the Budget section. All GRANT FUNDS ARE SUBJECT TO APPROVAL!

Responsibilities of Sponsoring Group

- Minimum of three types of advertising
- Post event on the online Campus Calendar
- Submit your event to the Student Life Weekly e-mailhttp://slp.lafayette.edu/thisweek/submityourevent/
- Include The Spot logo on all advertisements
- Work with the Office of Student Life Programs to execute event, including work orders, contracts, payment, etc.
- Should there be any complications during the event, group members are expected to follow instructions from The Spot professional staff, student night manager or Bear Security.
- Complete evaluation (on back of application) after the event and turn it in to the Office of Student Life Programs (115 Farinon) within one week of the event.

Budget

Please provide a detailed breakdown of expected costs for your event.

Be sure to include cost of performers, any special set-ups and work orders, supplies, advertising, decorations, additional food, giveaways/prizes etc.\

| Expense | Cost | How will you pay? |
|-----------------|-------|-------------------|
| Example: DJ Joe | \$500 | Contract/Check |
| | | |
| | | |
| | | |
| | | |
| | | |

Any contract and check requests that must be completed should be turned in to the Office of Student Life Programs at least three weeks prior to your event. Purchase orders can be picked up at the Office of Student Life Programs Mon-Fri, 9am-Noon and 1-5pm.

| at The Spot. I understand that i | all rules and responsibilities of planning a weekend events misuse of the space or failure to adhere to all guidelines or anizations ability to use The Spot for future event or subject ssible disciplinary actions. |
|----------------------------------|---|
| Printed Name | Signature & Date |

STOP! Turn in application when you have reached this point!

Last page will be filled out after the event.

SPOT WEEKEND EVENT EVALUATION

| Event Date: | Day of Week: | | |
|--|--|--|--|
| Expected Attendance: | Approx. Attendance: | | |
| What was successful about the event? | How did you promote the event? | | |
| What could have been done to improve the quality of the program? | Please rank how satisfied you were with the following: Not satisfied Very Satisfied | | |
| | — Event Planning/Application 1 2 3 4 5 | | |
| Would you recommend this event be repeated? If yes, why? If no, why not? | Student Employees 1 2 3 4 5 Facility 1 2 3 4 5 Food & Beverage 1 2 3 4 5 Security & Shuttle 1 2 3 4 5 Overall Evaluation 1 2 3 4 5 | | |
| | Additional Comments | | |
| Did you meet the goals of your event? (see inner proposal) (give examples) | | | |
| | What future programs/events would you like to see occur atThe Spot? | | |
| Person Preparing Evaluation: | | | |
| • | advertisements, copies of contracts ments you used for your event. | | |
| · | N A WEEK OF THE FINISHED EVENT | | |
| Management use only: | | | |
| | | | |
| | | | |
| | | | |