

# Tarleton State University

**FOR OFFICE USE ONLY**  
 Date Received: \_\_\_\_\_  
 By: \_\_\_\_\_

## ACTIVITY PERMIT

The activity permit with all required signatures must be returned to the Office of Student Activities, Room 103, Thompson Student Center, a minimum of 5 days prior to the event. This form will reserve space, approve publicity, review risk factors and update the university web calendar. For more information contact Student Activities at 254.968.9256.

**ROOM RESERVATION:**

Name of Organization/Department: \_\_\_\_\_  
 Event: \_\_\_\_\_  
 Date(s) of Event: \_\_\_\_\_  
 Event Start Time: \_\_\_\_\_ ( ) AM ( ) PM End Time: \_\_\_\_\_ ( ) AM ( ) PM Number of Participants Expected: \_\_\_\_\_  
 Set Up: \_\_\_\_\_ ( ) AM ( ) PM to \_\_\_\_\_ ( ) AM ( ) PM Tear Down: \_\_\_\_\_ ( ) AM ( ) PM to \_\_\_\_\_ ( ) AM ( ) PM

**WEB DESCRIPTION:** Provide a description of the event to be used on the web calendar.

\_\_\_\_\_  
 \_\_\_\_\_

**REQUIRED SIGNATURES:**

Location: \_\_\_\_\_  

Building	Room Name/Number	Facility Approval Signature (note box below)
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Requester's Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 (Please Print)

Advisor's Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 (Please Print)

Request Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Student Organizations Only) Office of Student Activities

**RISK FACTORS:** Do any of the following describe your event? If so, additional paperwork may be required to gain approval. Confirm requirements with the Office of Student Activities prior to finalizing activity/event.

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Alcohol may be present | <input type="checkbox"/> Open to the public | <input type="checkbox"/> Outside vendors involved  | <input type="checkbox"/> Large scale/complex |
| <input type="checkbox"/> Food involved          | <input type="checkbox"/> Outdoor event      | <input type="checkbox"/> Potential risk for injury | <input type="checkbox"/> Special publicity   |
| <input type="checkbox"/> Fundraiser             | <input type="checkbox"/> Involves travel    |  |  |

**Thompson Student Center Set Up**  
 Set Up:  
 Begin Time \_\_\_\_ ( ) AM ( ) PM  
 End Time \_\_\_\_ ( ) AM ( ) PM  
  
 Set Up Diagram Attached: ( ) yes ( ) no  
 Number of People Expected: \_\_\_\_\_  
 Special Equipment Needed:

**Approval of University Facilities**

Academic Classrooms .....	Registrar's Office
College Farm .....	Agriculture Center Manager
Dining Hall .....	Director of Food Service
Fine Arts Center .....	Director of Fine Arts Center
Hunewell Bandstand .....	Director of Student Activities/TSC
Intramural Complex/Recreational Sports Center .....	Director of Recreational Sports
Library .....	University Librarian
Outdoor Areas .....	Director of Student Activities/TSC
Patio .....	Director of Student Activities/TSC
Residence Halls .....	Director of Housing
Thompson Student Center .....	Director of Student Activities/TSC
Wisdom Gym/Swimming Pool/Parking Lot .....	Department of Physical Education

