

WLC-HOSTED EVENT REQUEST FORM

This form can only be submitted by a WLC full-time faculty or staff member.

This is NOT a confirmation that this event is scheduled and/or approved. WLC-hosted events must be approved by the President's Cabinet with signatures. Failure to submit this form PRIOR to agreeing to host an event negates any obligation on the part of WLC and resources to host/facilitate any proposed event.

Event title:

Event description:	
Proposed event date(s):	Proposed event time(s):
Event location(s):	Estimated attendance:
By submitting this request, I understand that I at the event which includes, but is not limited to:	am committing myself and my department to facilitation of
Staffing: meeting, greeting, directing guest	ts day of event
Communication: contacting outside groups	s, answering questions before/during/after event
Registration/ticketing before and during arArranging and confirming any catering dir	ny event rectly with Sodexo including times, menus, numbers, prices, et
 Logistics: parking, marketing materials, fa Detailed documentation of setup and A/V Acquire proof of \$1,000,000 insurance fro 	requests provided no later than two weeks prior to event start of
NOTE: Requests for catering and other services ar	re based on availability and may be subject to additional charg
Signature:	Print name:
For administrative use:	
Submitted to building manager of primary facility	of proposed event. Date: Initials:
Copies of event request form filed with:	
Vice President of Finance	
Director of Events & Conferences	
Building Manager of proposed facilities	