

Club Sports Event Request Form

Today's Date: _____ Org. Account Number: X _____ Event Day and Date: _____

Club Sport Name: _____ Event Name: _____

What is the purpose of this event? _____

Please briefly describe your vision for this event: _____

Please fill in each box below to determine the overall risk level of your event, and indicate by circling the correct option.

Type of Sport and Audience	<p>Type of Sport:</p> <p>5 Points: Bowling, Dance, Golf, Tennis, Volleyball, Walking, Fishing</p> <p>10 points: Baseball, Cross Country Skiing, Kickball, Softball</p> <p>15 Points: Basketball, Cheerleading, Flag or Touch Football, Quiditch</p> <p>20 Points: Diving, Dodgeball, Gymnastics, Ice Hockey, Inline Hockey or Skating, Martial Arts, Soccer, Lacrosse</p> <p>30 Points: BMX Biking, Water Polo, Open water events, Boxing, Rugby, Streetball, Cycling, Mixed Martial Arts, Skateboarding, Tackle Football, Mountain Biking, Wrestling</p> <p>Points: _____</p>	<p>Expected Number of Participants:</p> <p>_____</p> <p>Expected Number of Spectators:</p> <p>_____</p> <p>Participant Points: _____</p> <p>Spectator Points: _____</p> <p>Total Points: _____</p> <p>0-12 Participants = 0 points 12-40 Participants = 5 points 41+ participants = 10 points</p> <p>0-50 Spectators = 0 points 51-100 Spectators = 5 points 101-150 Spectators = 10 points 151+ = 15 points</p>	<p>Affiliation with EMU:</p> <p>EMU Students Only? Y N Invited Competitor? Y N</p> <p>Points: _____</p> <p>Invited Competitors = 5 points</p>	TOTAL SPORT AND AUDIENCE RISK POINTS
Presence of Cash and Valuables	<p>Ticketed: Do you plan to charge admission? Y N</p> <p>Points: _____</p> <p>No tickets = 0 points Ticketed = 5 points Ticketed w/\$1000+ sales = 10 points</p> <p>*Must follow University policy on ticket sales</p>	<p>Prizes: Do you plan to have prizes on site? Y N</p> <p>Points: _____</p> <p>None = 0 points Cash/Prizes on site = 5 points Cash/Prizes >\$1000 = 10 points</p>		TOTAL CASH AND VALUABLES RISK POINTS
Timing and Location	<p>Time of Day:</p> <p>Desired Facility: _____</p> <p>Access Time: _____</p> <p>Event Start Time: _____</p> <p>Event End Time: _____</p> <p>Points: _____</p> <p>8 am – 10 pm = 0 points Occurs/cont. after 10 pm = 5 points</p>	<p>Day of Week:</p> <p>Requested Event Date is :</p> <p>Sun Mon Tues Weds Thurs Fri Sat</p> <p>Points: _____</p> <p>Sun-Weds = 0 points Thurs/Fri/Sat 8 am-10 pm = 0 points Thurs/Fri/Sat 10 pm - later = 5 points University closure = 10 points</p>	<p>Location (circle one):</p> <p>Bowen Fieldhouse Convocation Center* Fletcher Field Indoor Practice Facility (Bubble)* Rec IM Rynearson Stadium* Softball Field (Rec/IM)</p> <p>Points: _____</p> <p>Buildings above = 0 points Other locations = 10 points Outdoors = 10 points *Fee for use All locations subject to fee for use</p>	TOTAL TIMING AND LOCATION RISK POINTS

Nature of Event and Food	Type of Event (circle one): Practice Dual Meet/Competition Tournament (> 2 teams competing)	Do you plan to serve food? Y N No Points Must follow University guidelines	Do you plan to request special permission to use an external vendor? Y N Points: _____ EMU Catering = 0 pts. External Vendor = 5 pts.	TOTAL NATURE OF EVENT AND FOOD POINTS _____
	Points: _____ Practice = 0 points Dual Meet = 5 points Tournament = 10 points			
TOTAL RISK POINTS				_____

This event risk level appears to be:

Low Risk (No more than 30 points) No additional requirements

Medium Risk (35-55 points) Notification to Rec/IM Staff and DPS for possible walk-through

High Risk (60+ points) Provide proof of insurance, Staff or DPS walk-through required, Trainer or Ambulance on scene

Note: Additional points will be added for past history of unrealistic planning, violent conduct or other incidents by the organization or its members.

I warrant I have the authority to make this agreement on behalf of my organization. I also warrant that by completing and submitting this form, my student organization/club sport understands and agrees to abide by the terms and conditions of the EMU Student Organization Special Events Policy, the EMU Student Code of Conduct and all applicable federal, state and local laws. I acknowledge that my organization will accept full responsibility for timely payment (within 30 days of event date) of all university charges associated with this event. On behalf of the student organization named above, I warrant that my student organization and its members are not acting as official entities of the university and I agree to defend, indemnify and hold harmless EMU, its employees, agents and students from any and all liability which may incur arising directly or indirectly from my student organization's/club sport's hosting of this event.

Club Sport President

Signature: _____ Name: _____ Phone #: _____
Email: _____ EID #: _____

Event Primary Contact

Signature: _____ Name: _____ Phone #: _____
Email: _____ EID #: _____

Faculty/Staff Advisor (required - medium & high risk events)

Signature: _____ Name: _____ Phone #: _____
Email: _____ EID #: _____

FOR OFFICE USE ONLY:			
Submission Date: _____	Date Reviewed by SERC: _____		
Event Approval Status: _____	Notification Date to Org.: _____	Initials: _____	
Number of DPS Officers Required: _____	Estimated DPS Cost: _____	Deposit Paid: _____	
Date of first follow up appointment with facility manager: _____	Did org. attend meeting? _____		
Date of final pre-event meeting: _____	Did org. attend meeting? _____		

