



### Event Participation/Registration Form

Name of Student Organization: \_\_\_\_\_

Description of Activity/Event: \_\_\_\_\_

Activity/Event Location: \_\_\_\_\_ Activity/Event Date: \_\_\_\_\_

# of Participants: \_\_\_\_\_ Total Event Cost: \_\_\_\_\_ Cost per Person: \_\_\_\_\_

Student member who should be contacted with questions regarding this activity/event:

Activity Leader Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Activity Leader Email: \_\_\_\_\_

#### List of Participants:

Only students who have paid Student Activity Fees for the semester of the activity/event will be allowed to participate. By providing an 81x number, you agree to this verification policy.

	Student Name (Print or Type)	Student 81x Number	Approval (DOSBO use only)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			

*If there are more than 18 participants, please make a copy of this form to fill out additional lines.*

\_\_\_\_\_  
Printed Organization Advisor Name

\_\_\_\_\_  
Organization Advisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Organization Advisor Email

\_\_\_\_\_  
Organization Advisor Phone #