



## Club/ Organization Activity Approval Form

(Note: this form must be completed at least **four weeks** prior to the scheduled activities.)

Club Name: \_\_\_\_\_

Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Place of Event: \_\_\_\_\_

Time of Event: \_\_\_\_\_

Purpose of Event: \_\_\_\_\_

Please check only **ONE**:

- Community Service
- Club Awareness Activity
- Educational
- Social Event
- Fund Raiser (explain items or service being sold and price)

\_\_\_\_\_

Specific Activities of Event:

\_\_\_\_\_

Equipment needed (be specific as to tables, outlets, other facilities needed, etc.) You will need to send an email to facilities ([facilities@cravencc.edu](mailto:facilities@cravencc.edu)) and tag me on the email.

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Date	Club President
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Date	Club Advisor
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Date	Campus Life Coordinator
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Date	Accounting Controller Brock 231 (required for Fundraiser event)
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