

**Center for Student Involvement/Funds Allotment Council**

Event Details

(Note: Many of these will not be applicable for FAC funded events.)

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| **Event Program Details** | |
| **Name of Event: Location:**  Reservation Confirmation #: | |
| **Main Performer:**  Slate section below | **Opening Performer:** |
| **Date(s) of Event:** | **Event Start Time:** Opening Act:  Doors Open: Main Act:  Question/Answer Session: |
| Length of Show:  Number of Show(s): | Set up Time:  Sound Check Time: |
| **Event Description:** | |

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| **Hotel and Transportation** | |
| **Hotel Paid by:**  Truman State University or Performer  (\*If Truman, you must complete a FAC Request for Funding form)  **Arrangements to be made by:**  Truman Funded Org or Performer | **Name of Hotel:**  **Dates of Hotel Stay:**  **Phone number:**  **Number of Rooms per date:**  **Confirmation # (s):** |
| **Transportation Paid by:**  Truman State University Performer  Reimbursement: yes no  **Arrangements by:**  Truman Funded Org or Performer | **Airline:**  **Flight Number:**  **Departure Airport: Dep. Time:**  **Arrival Airport: Arr. Time:**  **Pick up Location:**  **Pick up Time:** |
| **Circle University Vehicle to Use:**  Car Mini Van Passenger Van | **Person to Drive Vehicle:**  \_\_\_ Staff \_\_\_ Faculty \_\_\_ Student |

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| **Hospitality** | |
| **During Show Needs:** | **Dressing Room Requirements:** |
| **Meals: yes or no**  **Number of People:** | **Meal Requirements:** |

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| **Rider** | |
| **DPS Security:**  **Student Security:** | **Complimentary Items:** |
| **Special Requirements:** | **Liability:**  **Insurance:** |
| **Parking:** | **Other:** |

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| **Production Information** |
| **Stage Requirements:** |
| **Sound and Lights:**  **\_\_\_ Included in artist’s fee \_\_\_ Truman State University Venue (BH)**  **----- To be supplied locally through a Production Company** |
| **Truman State University Venue**  \_\_\_ Microphone \_\_\_ Mic Stand \_\_\_ Lapel Microphone \_\_\_ Laptop  \_\_\_ Podium \_\_\_ Spot Light \_\_\_ Screen \_\_\_ Projector  \_\_\_ Stool \_\_\_ Beverage \_\_\_ Flip Chart \_\_\_ Chair  Additions: |
| **To be supplied locally- List of Production Companies:** |

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| **TICKET and Merchandise INFORMATION** | |
| **Student Price:** | **General Admission:** |
| **Date Tickets Available**  Student:  GA: | **Projected Attendance:**  **Gross Revenue sales:**  Student:  GA: |
| Online Tickets? Yes \_\_\_\_\_ No \_\_\_\_\_ | Additional Info: |

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| **PUBLICITY INFORMATION** | |
| Copy Right Issues for Event: | Posters Needed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| What publicity is to be used:  \_\_\_\_ Posters \_\_\_\_ Handbills \_\_\_\_ Invitations ­­\_\_\_\_ Table Tents \_\_\_\_ Other | |
| Other Publicity Planned (outside of Publications/Printing Services)  Media Services: Press Passes: | |

Please attach any additional information that is vital to your event to this document. Please return this form to the CSI Program Advisor who you are working with.