



All in One Request for Campus Activity

Student Life

StudentLife@DaytonaState.edu

Daytona Campus, L. Gale Lemerand Student Center, Room 218

Instructions

This form must be submitted to the Student Life Office 10 business days prior to the date of the event.

Requestor Information

| | | | |
|--------------|--|------------|--|
| Org Type | | | |
| Org Name | | | |
| Contact Name | | | |
| Phone | | Event Date | |
| Start Time | | End Time | |
| Campus | | Location | |

Equipment Needed

Tent: # _____ Table: # _____ Chair: # _____ Cooler: # _____

Ice _____ Speaker Box _____ Microphone _____

Games: _____

Purpose of Request *(please give a detailed description)*

Event Details and Notification

Open to the Public

Club Members Only

Flyer Attached *(10 business days prior to event)*

IBox Request Attached *(10 business days prior to event)*

2 Account Funds Requested

6 Account Funds Requested: 6- _____

Items Request for Purchase *(attach additional forms if needed)*

Pizza: # _____ Toppings: _____

Water: # _____ Soda: # _____ Type: _____

Plates & Napkins _____ Flatware _____

Daytona State College Employee Signature

Date