

All SGA club and organization events occurring during the 2020-2021 academic year must be submitted for approval. This is to ensure that all events follow and adhere to all COVID-19 guidelines administered by the state of Pennsylvania and Messiah University. Please submit this form to silp@messiah.edu prior to planning or promoting club events. **This form must be submitted 3 weeks in advance if the event requires any catering or services from the university. If the event does not require any catering or services from the university, this form must be submitted one week prior to the event.** Any questions regarding this process can be directed to SILP@messiah.edu or silpga@messiah.edu

# Please note:

# Number of attendees may not exceed maximum room occupancy, 25 attendees (if indoors) or 250 attendees (if outdoors).

# NOTE: if your meeting serves educational purposes, you may be allowed to exceed 25 people indoors if approved. See end of form.

# In-person guest speakers are not permitted. Guest speakers should be scheduled via Zoom/virtual guests. However, all guest speakers must be approved by the SILP Office before attending virtually. Guest Approval Form can be found here <https://www.messiah.edu/info/21478/clubs_and_organizations/2203/forms_-_clubs_and_organizations>

# Clubs must designate a member to monitor and count the number of attendees at each event. Please email the SILP Office with the final headcount in attendance of the event.

# An advisor or proper supervision must be present at all times throughout the entire duration of all events.

# Face masks must be properly worn at all times, including outdoor events.

# Any face-to-face activity must incorporate social distancing expectations (ability to maintain six feet apart from each other for duration of activity).

# All catering must be requested through Two Bridges Catering with parameters established by Dining Services.

# PERSONAL INFORMATION

Name

Club Name

Club Email

Phone

# EVENT/MEETING INFORMATION

Meeting Description

Meeting Date(s)

Start Time

End Time

Est. Setup Time

Is this a recurring event? ………..

 If yes, please explain:

# PARTICIPANT INFORMATION

Number of attendees/participants expected:

Name of student monitoring and counting number of attendees \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of advisor that will be present at all times during event \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will there be a guest speaker attending virtually? \_\_\_\_\_\_\_

Will masks be mandated at all times? \_\_\_\_\_\_\_\_

Will you be at least 6 feet apart at all times? \_\_\_\_\_\_

How will you enforce mask-wearing/social-distancing and what is your COVID-19 Safety Plan?

**Services needed (please mark all that apply)**

Catering Projection/Presentation

Tech/Sound/Lighting Room Setup (tables/chairs/staging)

Parking

Please provide a brief description of your event and the specific services/needs you will have:

# LOCATION REQUEST

Please list the room or outdoor area you would like to request:

Room/Outdoor Area Requested

If your event/meeting serves educational purposes, are you planning to have more than 25 people indoors? If yes, please explain and provide learning outcomes below.

I have read and agree to the above COVID-19 restrictions for student organization events for the Fall semester of 2020.

 *Student Leader Printed Name Student Leader eSignature Date*

 *Advisor Printed Name Advisor eSignature Date*

*This portion of the form is to be filled out by the SILP Office*

This form has been approved by the SILP Office: **YES** **NO**

 *SILP Office eSignature Date*