



SUMMER CONFERENCE | REQUEST & EVENT QUESTIONNAIRE FORM

CONTACT & ORGANIZATION INFORMATION

Organization Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Website: _____

Contact Name: _____ Phone Number: _____

Email Address: _____ Fax Number: _____

Organization Type (check all that apply):

- Campus Department SFSU Student Individual not affiliated with SFSU
- Educational Institution Government For-profit Non-profit*

*If non-profit, is it also tax exempt? YES NO (IRS determination letter will be needed)

Is your organization being co-sponsored by an on campus department? YES NO

What is mission statement of the organization?

Can the organization provide the University with a Certificate of Liability Insurance and Additional Insured Endorsement form, per the University's requirements? YES NO (If not, the option to purchase direct from SF State is available)

AUTHORIZED PERSONNEL TO SIGN CONTRACT (if different from above)

Contact Name: _____ Phone Number: _____

Email Address: _____ Fax Number: _____

BILLING CONTACT (if different from above)

Contact Name: _____ Phone Number: _____

Email Address: _____ Fax Number: _____

Address: _____

City: _____ State: _____ Zip Code: _____

CONFERENCE INFORMATION

Official Conference/Event Name: _____

Purpose of Conference/Event:



OVERNIGHT ACCOMMODATIONS

Minimum guests per night:

Mary Park/Mary Ward Hall: **46** | Towers Junior Suites: **10** | Towers & Village @ Centennial Square: **15**

Estimated Overnight Guests: _____ Estimated Commuters (no overnight): _____

Total Estimated Attendance: _____ Age Range of Guests: _____

Number of Adults in Attendance: _____ Number of Youth(s) in Attendance*: _____

*Please Note: Any youth(s) in attendance requires a 1 to 10 ratio between adult to youth. A release of liability form will be required for youth participating in conference/event programs. A “minor” or “youth” is defined as any person under 18 years of age.

	Guest count in doubles	Guest count in singles
Mary Park & Ward Halls (traditional residence halls):	_____	_____
Towers Junior Suites (suite style):	_____	_____
Towers @ Centennial Square (2 bedroom apartments):	_____	_____
Village @ Centennial Square (2 & 3 bedroom apartments):	_____	_____

Will guests need bed & bath linens with their accommodations? (Additional fees are applicable)

YES NO

ACCOMMODATION ARRIVAL AND DEPARTURE TIMES

Arrival Date: _____ *Arrival Time: _____ a.m. p.m.

Departure Date: _____ *Departure Time: _____ a.m. p.m.

**Check in time is 3:00 p.m. on arrival date and Check out time is 11:00 a.m. on departure date. Guests arriving early or departing late may store their belongings in a secure luggage room.*

Are there multiple arrival/departure dates and time? Please explain below.

DINING SERVICES & SCHEDULE

City Eats is the main dining center for the residential. One meal is required per day per guest for programs staying within the residential community.

BREAKFAST

Total Guest Count _____

Total # of Days _____

LUNCH

Total Guest Count _____

Total # of Days _____

DINNER

Total Guest Count _____

Total # of Days _____



CONFERENCE/EVENT INFORMATION

Which campus are you interested in? (check all that apply)

- Main Campus
- Downtown Campus (835 Market St.)
- Tiburon Campus

Which venues are you looking for? (check all that apply)

- Classrooms
- Conference Center
- Theaters
- Outdoor Space
- Theaters
- Fields
- Tennis Courts

Other please explain: _____

Do you have a specific venue in mind? YES NO If yes, please list:

Besides the main venue, will you need other rooms/venues? YES NO

If yes, how many and what type?

Total Estimated Attendance: _____ Daily Estimated Attendance: _____

Age Range of Attendees: _____ Number of Youth(s) in Attendance*: _____

*Please Note: Any youth(s) in attendance requires a 1 to 10 ratio between adult to youth. A release of liability form will be required for youth participating in conference/event programs. A "minor" or "youth" is defined as any person under 18 years of age.

Do you expect any high profile individuals? YES NO

If yes, who? _____

Planned Activities (please attach daily schedule, agenda or flyer, as appropriate):

CONFERENCE/EVENT DATE(S) & TIME(S)

Start Date: _____

End Date: _____

Start Time: _____

End Time: _____

Guest Arrival: _____

Guest Departure: _____

SET-UP/LOAD OUT DATE(S) & TIME(S)

Include the date & time your team will arrive to setup through time your last team member will depart from event.

Start Date: _____

End Date: _____

Set-up Start Time: _____

Load Out Time: _____



If the event has multiple dates with various locations, please include the details below:

SEATING CONFIGURATION (Seven Hills & Towers Conference Center only) [View configurations](#)

Please Note: Academic classroom seating style cannot be altered, contact the Event Services Coordinator for more details.

- Banquet Cabaret Reception Column, Square or U-Shape
- Boardroom Classroom or Lecture Workshop Other (describe below):

Please describe set-up including registration/check-in, panel discussion, poster sessions, breakout sessions, and informational tables:

AUDIO/VISUAL

Will A/V equipment needed? YES NO

If yes, please check all that apply:

- Projector Projector Screen Portable Screen Stage Flat Screen TV
- Audio Recording Sound System Dance Floor Laptop PowerPoint Clicker
- Adaptors (MAC) Microphones Podium Easels Flip Charts
- Conference Speakerphone Webcam Other (describe below):

Please describe media being played:

Will you be conducting a Webinar/Virtual Meeting? YES NO



If yes, please describe the Webinar/Virtual Meeting content you will be streaming:

Will you be providing any of your own A/V equipment? YES NO

If so, please describe the items that you will be providing: (Projector, Microphone, Amplifications Equipment, etc.)

FOOD & BEVERAGE

Will your conference/event require catering services? YES NO

If yes, please check all that apply:

- All Day Service Breakfast Service Buffet Lunch Service Box Lunches
- Snack Service Dinner Buffet Plated Meal Service Cocktail Reception
- Bar Service Cold Beverage Service Hot Beverage Service Other (describe below):

If no, will you be providing food & beverage? YES NO

If yes, please check all that apply:

- All Day Service Breakfast Service Buffet Lunch Service Box Lunches
- Snack Service Dinner Buffet Plated Meal Service Cocktail Reception
- Bar Service Cold Beverage Service Hot Beverage Service Mock-tails
- Potluck Delivery Other (describe below):

Who will be providing the above selected food and beverage?

Will your conference/event serve alcohol? YES NO

If yes, what type of alcohol service? (Please Note: An Alcohol Clearance Form is required)



MISCELLANEOUS INFORMATION

Will the event be open to the public or private? Public Private

Does this event require a ticket for attendance? YES NO

Is there a fee to attend this event? YES NO If Yes, What is the cost? _____

Will there be monetary transactions? Cash Credit Card E-commerce Not Applicable

Will there be any auctions, donations, vendors, concessionaires, exhibitors, fireworks, carnival rides, inflatable activities, amplified sound, or live music? YES NO If yes, please list:

How will the event will be advertised?

Will any part of your conference/event be filmed? YES NO

If yes, please describe purpose of filming and type of media to be shown (TV, private use, web, and screen). Please Note: A film permit may be required. Contact your Event Services Coordinator for more information.