

CHAPTER / CLUB EVENT PERMIT

INCOMPLETE FORMS WILL NOT BE PROCESSED

CHAPTER/CLUB _____ GRAD YEAR _____ TODAY'S DATE _____

Chapter Club

CONTACT (PRINT) _____ SIGNATURE _____ PHONE # _____

ON CAMPUS EVENT

DESCRIPTION OF EVENT _____

DATE _____ TIME _____

LOCATION: ACROSS FROM ODENO TABLE 1 TABLE 2

OFF CAMPUS EVENT

When planning an event off campus, a

CERTIFICATE OF INSURANCE

from the venue/supplier adding Sault College Students' Union as additional insured must be provided to SCSU

14 days prior to the planned event.

Off campus events are not endorsed by SCSU without a CERTIFICATE OF INSURANCE.

DESCRIPTION OF EVENT _____

DATE _____ TIME _____ PLACE _____

OFFICE USE ONLY
SCSU DATE STAMP AND STAFF INITIALS

ON CAMPUS EVENT

APPROVED BY _____

TITLE _____

DATE _____

BOOKED BY _____

DATE _____

OFF CAMPUS EVENT

CERTIFICATE OF INSURANCE

DATE RECEIVED _____

APPROVED BY _____

SCSU PRESIDENT'S SIGNATURE

DATE _____