

EVENT REQUEST FORM FOR
ONLINE STUDENT LIABILITY WAIVER

Note: Event request form for online student liability waiver must be emailed in PDF format to saabofoms@jjay.cuny.edu **at least 2 weeks prior to an event.** Department/Organization logo and event flyer must be attached with this form. Any event requiring ticket distribution to the public will take place in the Student Activities Association, Inc. Business Office room L.66.03 NB.

Organization/Department Name: _____ **Phone Number:** _____

Contact Person Name: _____ **Email:** _____

Event Information

Event Date/Time: _____ / _____ **Number of Students Participating:** _____

Event Location: _____

Event Description:

Ticket Distribution Method

If tickets will be distributed for your event, select how they will be given out for participation.

___ **Selling** ___ **First Come, First Serve** ___ **Raffle** **Other** _____

Chaperone Contact Information

	Name	Email	Phone Number
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			