



# Associated Students, Inc.

## Funding Request Form

### 2016-17

"...For the Students, by the Students"

- Necessary Documents:
- Event Flyer w/ A.S.I. Logo
  - CSI Event Reg. Form
  - Estimates / Food Permits
  - Event Estimates / Invoices

#### Contact

#### Organization

Club/Organization: Zeta Beta Tau  
 Event Title: ZBT Charter Ceremony  
 Date(s) of Event: 4/8/17 Quarter: Spring   
 Location of Event: Los Angeles Room  
 Expected Total Attendance: 100  
 Expected Attendance of Cal State LA Students: 100

#### Event Description and Total Cost Breakdown

Briefly describe the event:  
 Ceremony to Award Greeks in Cal State LA for their accomplishments for the 2016-17 year.

Is the event open to all Cal State LA students?: Yes   
 How will this program enhance the Cal State LA experience?:  
 This Ceremony is to recognize greek orgs at campus for all their accomplishments throughout the year. This will benefit the campus because it will bring awareness of what greek life is to campus.

#### Hospitality

#### Honoraria/Contracts

Description	Amount

Description	Amount

#### Marketing

#### Other

Description	Amount
	0

Description	Amount
Food	715.08

#### Event Summary

#### For Office Use Only • Do Not Write Below

Total Cost of Event: 0  
 Amount Requested from A.S.I.: 715.08  
 Amount from other sources:    
 What other resources are you employing for this event?

#### Important:

- (1) All Funding Request Forms must be turned in by 12 PM Monday, the week of the Finance Committee Meetings.
- (2) Additionally, funding request forms must be turned in no less than 10 business days (2 weeks) prior to the event.
- (3) Deadline for Request for Payment or Purchase Order (RPP) is 15 days after the event.

All forms must have a Time Stamp and

staff initial: MM

17 MAR 20 11:25:49

# STUDENT ORGANIZATION EVENT REGISTRATION FORM

COMPLETED



This form must be completed 10 working days prior to the event date. Reservations for on campus events will not be confirmed unless this form has been completed. No publicity may be distributed or posted on websites until this form has been submitted for off campus events or until the reservation confirmation process has been completed for on campus events. Signatures must be completed in blue or black ink.

NAME OF ORGANIZATION: Latin Polite Team PHONE: 323-783-3806 DATE: 4/1/16  
 EVENT CONTACT NAME: Christina Perez EMAIL: parsefseal@yojando  
 NAME OF EVENT: ZBT Ceremony LOCATION: Los Angeles Forum  
 EVENT DATE: 3/25/16 BEGIN TIME: 2pm END TIME: 6pm ESTIMATED ATTENDANCE: 100

TYPE OF ACTIVITY (THE UNIVERSITY'S GENERAL RELEASE WILL BE REQUIRED FOR CERTAIN EVENTS)

- FUNDRAISER     EDUCATIONAL PROGRAM     SPIRITUAL PROGRAM     RECREATIONAL PROGRAM  
 DANCE/PARTY     SOCIAL PROGRAM     COMMUNITY SERVICE     CONFERENCE/CONVENTION  
 OTHER: \_\_\_\_\_

WILL YOUR EVENT INCLUDE ANY OF THE FOLLOWING? (PLEASE CHECK ALL THAT APPLY)

- SPORTS ACTIVITY OR TOURNAMENT     FOREST CLEAN-UP     INTERNATIONAL TRAVEL  
 BEACH CLEAN-UP     INDOOR/OUTDOOR COOKING     DOMESTIC TRAVEL  
 BEACH BONFIRE

PLEASE DESCRIBE THE EVENT BELOW (INCLUDE ALL ACTIVITIES):

*We are going to have a ceremony to officially recognize ZBT as a chapter.*

WHO IS INVITED (CHECK ALL THAT APPLY):

- STUDENT ORG. MEMBERS     CAL STATE L.A. COMMUNITY     OTHER COLLEGES & UNIV.     GENERAL PUBLIC     GUEST LIST

Events intended for the general Cal State L.A. campus will be listed in the Student Organization Calendar of Events distributed in a bi-weekly email by the Center for Student Involvement.  NO, I DO NOT WISH FOR MY EVENT TO BE POSTED.

WILL THE EVENT HAVE AN ADMISSION CHARGE, REGISTRATION FEE, OR DONATION?

(If yes, please complete statement regarding cash transactions on the back of this form)  NO  YES, HOW MUCH? \_\_\_\_\_

WILL A MOVIE BE SHOWN?  NO  YES (If yes, please attach written proof of viewing rights.)

WILL THE EVENT HAVE SECURITY?  NO  YES If yes, please explain \_\_\_\_\_

WILL FOOD BE SERVED AT THE EVENT?  NO  YES

IF YES, WHO WILL PROVIDE THE FOOD?  UNIVERSITY CATERING  OTHER: \_\_\_\_\_

A completed food permit is required for all on-campus events with food unless the food is provided by University Catering.

WILL ALCOHOL BE PRESENT AT THE EVENT?  NO  YES. Please attach a completed request to serve alcoholic beverages. (This form may take up to two weeks for review and possible approval.)

WILL THE EVENT BE HELD IN A RESTAURANT/VENUE WHERE ALCOHOL IS AVAILABLE?  NO  YES Initials \_\_\_\_\_  
 If so, please affirm organization members and guests will not consume alcohol.

WILL OFF-CAMPUS MEDIA BE NOTIFIED ABOUT THE EVENT (NEWSPAPER, TV, RADIO, ETC.)?  NO  YES

DOES THE STUDENT ORGANIZATION WANT TO PURCHASE SPECIAL EVENT INSURANCE FOR THIS EVENT?  NO  YES

Please be aware that student organization events are not covered for liability or other insurance by California State University, Los Angeles or the University-Student Union. Student organization officers or the advisor may be held personally liable. If the student organization would like to

## STATEMENT REGARDING CASH TRANSACTIONS

As an officer of: \_\_\_\_\_, a recognized student organization at California State University, Los Angeles, I affirm that all funds raised by this organization or assets assigned to this organization will be used solely for the benefit of the organization as a whole. Further, it is affirmed that no funds or assets of this organization will accrue to the benefit of any officer or member, or any private person.

Describe the fundraiser (including how the fundraiser or donation process will work, items to be sold, prize(s), etc):

\_\_\_\_\_

PRESIDENT: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
 TREASURER: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## EVENT GUIDELINES

The following guidelines are provided for the benefit of the student organization. They are intended to be followed completely. Failure to comply with any of the following guidelines may result in disciplinary action taken against the organization including suspension of recognition, events and use of facilities.

- CONDUCT:** The organization assumes full responsibility for the conduct of participants at the event. Any violation of University policy may subject the participants and/or the organization to disciplinary action by the Center for Student Involvement or Judicial Affairs.
- ALCOHOL:** Any event that involves consumption of alcoholic beverages requires authorization from the University. Your organization must complete a Request to Serve Alcoholic Beverages form available in the Center for Student Involvement. Please allow at least 3 weeks for this form to be reviewed by the University.
- PUBLICITY:** All publicity material including banners, brochures, announcements, etc. must have the name of the sponsoring group and the following statement: "The actions and opinions of this organization do not necessarily reflect those of the students, staff, faculty, or administration of Cal State L.A."

MY SIGNATURE BELOW INDICATES THAT I WILL TAKE RESPONSIBILITY TO ENSURE THAT THE EVENT WHICH MY ORGANIZATION IS SPONSORING WILL FOLLOW ALL GUIDELINES SET FORTH BY THE UNIVERSITY.

STUDENT ORG. OFFICER'S NAME: Christina Perez SIGNATURE (PLEASE USE BLUE OR BLACK INK ONLY): [Signature] DATE: 1/4/17  
 ADVISOR'S NAME: Christopher Johnson SIGNATURE: [Signature] DATE: 1/4/17

## ACKNOWLEDGMENT - FOR OFFICE USE ONLY

CENTER FOR STUDENT INVOLVEMENT (U.S.U. 2024)  
 CSUI VERIFIES THE ORG. IS RECOGNIZED BY THE UNIVERSITY

SIGNATURE: [Signature]

DATE: 1.4.17

CENTER FOR STUDENT INVOLVEMENT DIRECTOR

GENERAL RELEASE REQUIRED FOR ALL PARTICIPANTS?  NO  YES (DATE REQUIRED)

### NOTIFICATIONS

PUBLIC AFFAIRS DATE: \_\_\_\_\_  ATHLETICS DATE: \_\_\_\_\_  
 DEPT. OF PUBLIC SAFETY DATE: \_\_\_\_\_  FACILITIES USE COORDINATOR DATE: \_\_\_\_\_

NOTES OR UPDATES:



*Chartering Ceremony*

*of*

*Gamma Nu Chapter of Zeta Beta Tau Fraternity*

Date: Saturday, April 8, 2017  
Time: 5:00 p.m.  
Location: California State University Los Angeles  
University Student Union, Los Angeles Room  
5154 State University Dr,  
Los Angeles, CA 90032  
Attire: Business attire



Open invitation to all Cal State LA Students.  
Please Confirm with Christian 323-283-3886



Golden  
Eagle  
Hospitality

California State University, Los Angeles  
5151 State University Drive, Los Angeles, CA 90032  
Phone: (323) 343-6770 - Fax: (323) 343-6771  
Banquet Event Order

BEO # E29305  
Event Date: 4/8/2017 Saturday

Client/Organization Zeta Beta Tau		Event Date 4/8/2017 (Sat)	Booking Contact Sean Pariser		Event # E29305
Address 5151 State University Drive			City, St/Prov Postal Los Angeles, CA 90032	Booking Tel (626) 315-6964	Guests 100 (Act)
Party Name Zeta Beta Tau		Sales Rep Amy Miers	Theme		Category

Venue					
Description	Type	Start	End	Banquet Room	Setup Style
		4:15 pm	4:30 pm	Student Union	Delivery

**Food & Beverage**

Food/Service Items	Unit	Price	Total
**Deliver to USU LA Rooms AB at 4:30PM**			
(100) Disposables	Each	0.35	35.00
(3) Chicken Salad Tea Sandwiches	Dozen(s)	12.00	36.00
(3) Ham & Swiss Tea Sandwiches	Dozen(s)	12.00	36.00
(3) Cucumber Cream Cheese Tea Sandwiches	Dozen(s)	12.00	36.00
(3) Chicken Taquitos With Avocado Sauce	Dozen(s)	15.00	45.00
(1) Large - Kale & Quinoa Salad with Lemon Vinaigrette(75-100pp)	Bowl(s)	120.00	120.00
(2) Medium- 7-Layer Dip With Tortilla Chips (36-74pp)	Bowl(s)	60.00	120.00
(1) Large - Fresh Fruit Salad (75-100pp)	Bowl(s)	80.00	80.00
(3) Raspberry Ice Tea (Sweetened)	Gallon(s)	18.00	54.00
Water Service			

**Notes**

Will try for ASI Funding

Authorized Signature & Date: \_\_\_\_\_

GEH Signature & Date: \_\_\_\_\_

	Food	Beverage	Liquor	Equipment	Labor	Room	Other	Total
Subtotal	508.00	54.00	0.00	0.00	0.00	0.00	0.00	562.00
Service Charge	86.36	9.18	0.00	0.00	0.00	0.00	0.00	95.54
Taxes	52.01	5.53	0.00	0.00	0.00	0.00	0.00	57.54
Total	646.37	68.71	0.00	0.00	0.00	0.00	0.00	715.08

Subtotal	562.00	Paid	0.00
Tax	57.54	Balance	715.08
Service Charge	95.54		
Total Value	715.08		

*By signing this document, you are authorizing UAS to deduct payment from the above charge account once service is rendered. This Banquet Event Order is invalid unless signed and returned along with a check or purchase order to the Golden Eagle Hospitality Office. Missing catering equipment is the responsibility of the Authorized Signee. A 17% Service Fee and 8.75% Sales Tax will be Charged where applicable. 72 Hours Guest Count Confirmation and Cancellation Notice Needed.*

Authorized Signature & Date: \_\_\_\_\_

GEH Signature & Date: \_\_\_\_\_