

Event Management System (EMS)
Organization Registration Form (rev. 2017/3)
 Student Activities & Conference & Event Support Services (CESS)

Office Use Only:
 Entered: _____
 Trained: _____
 New Update Web



Instructions

Student groups in good standing may use this form to sign-up for EMS access to reserve campus spaces and resources for meetings and events. Student groups must select one member of the organization to access the system on the organization's behalf. For questions about this form, contact Student Activities at studentactivities@pacificu.edu or 503-352-3127 or 503-352-2822. Return a *hard copy* of this form *with your group's faculty or staff adviser's signature* via campus mail to Student Activities, UC Box A106. Your user must have logged into EMS (schedule.pacificu.edu) at least once *before* submitting this form.

Organization Info

Organization Name: _____

Which terms will this user serve? Current Fall 2017 Spring 2018 Other (please specify): _____

Name, Student EMS User	Phone	PU Email (@pacificu.edu)	Position (in group)
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Name, Faculty/Staff Adviser	Phone	PU Email (@pacificu.edu)	Add Adviser as user for Group?
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Yes No

Additional Event Contacts

The organization may list up to four additional student or adviser contacts who are chiefly responsible for planning events and may be specified by the EMS web user as the contact for an event. In addition to the web user, these students may be contacted by Catering, Facilities, CESS, Student Activities, Campus Public Safety, etc., regarding the organization's events.

Name	Phone	PU E-mail (@pacificu.edu)	Position (in group)
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Signatures

EMS Web User

I agree it will be my responsibility to:

- attend a training at the beginning of the semester on event planning and using EMS sponsored by CESS and Student Activities;
- use EMS in coordination with my group's event planners to accurately and timely request or cancel spaces and resources;
- facilitate timely communication between my group's event planners and EMS providers, e.g., CESS, Catering, Facilities, etc.;
- inform my group's members of concerns relevant to our event plans, e.g., University policies, rules for special spaces, etc.; and,
- follow all University policies and guidelines relevant to requesting and using spaces and holding events and meetings.

Signature: _____ Date: _____

Organization Leadership & Adviser

We agree our organization shall be responsible for EMS requests made on our behalf by our EMS web user named above. We understand it is our organization's responsibility to support and work effectively with this individual in this responsibility. If for any reason our web user cannot effectively fulfill their responsibilities, our organization shall be responsible for appointing another EMS web user and updating this registration form with Student Activities and CESS.

Organization Leader: _____ Date: _____

Adviser Signature: _____ Date: _____