

**University of Southern California – Trojan Event Services (TES)**  
**SOCIAL DANCE APPROVAL FORM**

This form is requesting approval to have a social dance and does not guarantee your reservation. Please fill out this form completely. Prior to filling out the form, please familiarize yourself with the **USC Social Dance Approval Process**. Review the Step by Step Instructions for completing the Social Dance Approval process. Be prepared to answer basic questions about your event's ticketing, advertising, entertainment and co-sponsorships. All requirements of the approving departments must be met prior to final event approval. Return the completed form (once all signatures have been obtained) to your Production Manager at TES in TCC 425.

Client Information:

Name of Recognized Student Organization:			
Contact Name (Must be a member of the student organization):		Contact Cell Phone:	
Contact Email:			

Event Information:

Event Date:	Event Location(s):	Event Start and End Time:	Expected number of attendees?
University Event Permit Application #	Enter your scheduled day and time to attend an Events Meeting?	Alcohol Requested to be served? (All requests for alcohol for undergraduate groups will be denied.)	
If alcohol requested, how will it be managed? Please explain (i.e., wristbands, limited consumption, etc.).			
Event Type: (Circle all that apply)	Dance - Fundraiser - Reception - Concert - Dinner - Cultural - Competition Other (please specify):		
Attendees (check one box):	<input type="checkbox"/> USC student organization members only <input type="checkbox"/> USC students and guest students <input type="checkbox"/> USC students and community members [For Outdoor Events ONLY] <input type="checkbox"/> USC students only <input type="checkbox"/> USC students and guest(s) and other college students <input type="checkbox"/> USC students, guest(s), other college		
Detailed Event Description: (Attach an additional page as needed)			

**REQUIRED EVENT REQUEST APPROVALS (Must be signed in numerical order):**

*\*Signatures below indicate that the USC Social Dance Approval process has been reviewed and is approved by you. All social dance policies and requirements will be followed.*

I have read the General Guidelines for an outdoor event and/or dance policy and agree to adhere to the policies as outlined.

Primary Contact Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

USC Student ID # \_\_\_\_\_ Position held in organization \_\_\_\_\_ Date: \_\_\_\_\_

Staff/Faculty Advisor Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title \_\_\_\_\_ Date: \_\_\_\_\_

Director of Campus Activities Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Office of Fraternity & Sorority Leadership (Greek only. The signature for the Director of Campus Activities is not required):

Signature \_\_\_\_\_ Print Name: \_\_\_\_\_

Title \_\_\_\_\_ Date: \_\_\_\_\_

Director of Trojan Event Services Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

USC Department of Public Safety Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title \_\_\_\_\_ Date: \_\_\_\_\_

*(NOTE: Attach Outline of Conditions as discussed at the Events Meeting. Documents taken to AVP and VP by TES only.)*

Assistant Vice Provost for Student Life: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Vice President for Student Life: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_