



North Campus Student Life  
"Enhancing Student's Minds One Event at a Time"

Club / Organization  
Activity Registration

**SUBMIT THIS FORM TO STUDENT LIFE, BUILDING 46 ROOM 133, AT LEAST THREE WEEKS PRIOR TO PROPOSED ACTIVITY (SIX WEEKS PRIOR FOR MAJOR ACTIVITY)**

Club / Organization \_\_\_\_\_ Today's Date \_\_\_\_\_

Type of Activity:  Social  Educational  Community Service  Fundraising  
 Other \_\_\_\_\_

Name of Activity: \_\_\_\_\_  On Campus  Off Campus

Location: \_\_\_\_\_ Activity Date: \_\_\_\_\_  
(On Campus Location, Off Location Address)

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_ Cost of Admission \$ \_\_\_\_\_

Contact Person: \_\_\_\_\_

Point of Contact Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Activity Description:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How does the activity meet the goals of your organization?:  
\_\_\_\_\_  
\_\_\_\_\_

Organization Rep. \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Print Name Above)

Advisor \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Print Name Above)

**\*\* PLEASE ATTACH COPY OF FACILITY REQUEST FORM OR VENUE RECEIPT TO BACK\*\***  
**Office Use Only**

Location(s) Reserved with Facilities  YES  NO Activity Status:  APPROVED  DENIED

Student Life Director Signature \_\_\_\_\_ Date \_\_\_\_\_  
1000 Coconut Creek BLVD. BLDG. 46, ROOM 133 Office: (954) 201-2325 Fax: (954) 201-2326  
Coconut Creek, FL 33064 [nlife@broward.edu](mailto:nlife@broward.edu)