# Associated Students, Inc. 2018-19 Multiple Club

	Necessary Documents:
	Event Flyer w/ A.S.I. logo
	CSI Event Reg. Form
	☐ Food Permit
	Event Estimates/Quotes
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"For the Students, by the Students Funding Reques	Event Estimates/Quot	es
Contact		it Form
	Total Cost Breakdou	wn
	Honoraria	-
	Description	Amount
Lead Organization	·	
Lead Club/Organization: Association for Computing Machinery	Marketing	
Event Title: Movie Fundraiser	Description	Amount
Date(s) of Event: October 5th 2018	Description	Amount
Location of Event: Edwards Alhambra Theater \$3,530.60		·
Exp. Total Attendance: 250 25 th. Amount: 50.00		
Exp. Attendance of CSULA Students:		
Will multiple clubs be splitting the cost?: ✓ YES NO		
Club/Organization B: American Society of Mechanical Engineers	Hospitality	
Contact: Bryan Tan Nguyen %: 14.17 Amount: 500	Description	Amount
Club/Organization C: Society of Hispanic Engineering & Science Students		
Contact: Alexis Rios %: /4,/7 Amount: \$500		-
Event Description		
Briefly describe the event: Movie fundraiser collaboration		
between 4 engineering clubs	Other	
How will this program enhance the Cal State L.A. experience?:	Description	Amount
Funds raised will go towards conference registration	Movie Theater rental	\$3,530.60
and materials for projects		
Is the event open to all Cal State L.A. students?: Yes		
For Office Use Only • Do Not Write Below	·	
Approved Amounts	Event Summary	
Hospitality: Proposal Number:		
Contracts: Funds Expire:	Total Cost of Event:	\$3,530.60
Marketing: Recognized?	Amount Requested from A.S.I.:	\$3,530.60
Other: Date Approved:	Amount from other sources:.	90.00
Total: BOD / ☐ Finance Account::		A Committee of the Comm
Account	What other resources are you employing for N/A	n uns event?
Important: (1) All Funding Request Forms must be turned in by 12 PM Friday, the week before the Funding Sub-Committee		
Meetings. (2) Additionally all paperwork must be submitted no		
less than 10 business day (2 weeks) prior to the event. (3)		
Deadline for Request for Payment or Purchase Order (RPP) is 15 days after the event.	THE STATE OF THE S	1 m 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Rev'd: 8/16/17

### Multiple Club/Organization-COSPONSOR AGREEMENT FORM

Please submit this form with the Funding Request Form if the Event is hosted by multiple clubs. Only clubs recognized by CSI may be listed. All percentages must add up to 100%. If any of the stated percentages are not approved by a signature of the club's president, your Funding Request will be postponed until this form is completed.

Event Name	Movie Night Fundraise	Event Date 101	5/2018	
Event Total Cost	\$3530.60	Amount Requested of A.S.	1. \$3,530.60	
LEAD CLUB & ORGAN	ZATION: Asso	ciation for Computing Machiner	AGREED	Total Amount to
PRESID	ENT'S NAME:		PERCENTAGE	be Awarded.
PRESIDENT'S EMAIL	AND PHONE:			0 22-60
PRESIDENT'S	SIGNATURE:	Garlin I	57.49	$2,030^{60}$
	L-16			
CLUB & ORGANIZATIO	NB: Ame	silan Society of Mechanical En	714AGREED	Total Amount to
PRESID	ENT'S NAME:	Man Maria of Allender	PERCENTAGE	be Awarded.
PRESIDENT'S EMAIL	AND PHONE:			500
PRESIDENT'S	SIGNATURE		14,17	500
			Ц	
CLUB & ORGANIZATIO	NC: TC:	f of Hispanic Engineering and Science	+ fudants	T
	N C: Society ENT'S NAME:	f of Hispanic Engineering and Science	PERCENTAGE	Total Amount to be Awarded.
PRESIDENT'S EMAIL			TEROENTAGE	
		0 3/4	14.17	500
PRESIDENT'S	SIGNATURE:	Vere //		
				N. C. C.
CLUB & ORGANIZATIO		ety of Women Engineers	AGREED	Total Amount to
	ENT'S NAME:		PERCENTAGE	be Awarded.
PRESIDENT'S EMAIL			7 1/1 17	500
PRESIDENT'S	SIGNATURE:	lu gf	] 14.17	300
CLUB & ORGANIZATIO	NE:		AGREED	Total Amount to
	ENT'S NAME:		PERCENTAGE	be Awarded.
PRESIDENT'S EMAIL	AND PHONE:			
PRESIDENT'S				\$0.00
CLUB & ORGANIZATIO	N F:		AGREED	Total Amount to
PRESID	ENT'S NAME:		PERCENTAGE	be Awarded.
PRESIDENT'S EMAIL	AND PHONE:			
PRESIDENT'S	SIGNATURE:			\$0.00
				<u> </u>
			15001	
		Total Percentage	: 100%	
		Total Amount to b	e \$3 520 (2)	
		Awarded	\$3,530.60	

BRING YOUR FRIENDS AND FAMILY TO WATCH THE SCREENING OF



MOVIE TRAILER



For more information on ticket vouchers visit:









MARVEL

SONY

COLUMBIA PICTURES



ASI

ASSOCIATED STUDENTS, INC.

E ACTIVITIES AND OPINIONS PRESENTED ARE NOT CESSARILY THOSE OF ASSOCIATED STUDENTS, INC.

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## Private Screening Confirmation



Booking ID:	Client Information:	Regal Group Sales Consultant:
	Association for Computing Machinery	Andrew Smith 800-792-8244 andrew.w.smith@regalcinemas.com

Dear Wilson Thomas,

We want to thank you for organizing a Private Screening through Regal Entertainment Group's Corporate Box Office. We hope you and your guests enjoy the show! Below is important information regarding your Private Screening, so please review the details carefully, and contact me with any questions at my contact information above. Thanks again.

Respectfully,

**Andrew Smith** 

Movie Title & Format of Film:

Venom will be shown in 2D

Screening Date:

10/05/2018

Theatre Location:

Alhambra Renaissance Stadium 14 & IMAX

1 East Main Street

Alhambra, CA 91801-3514

Screening Auditorium Number & Seat Count:

8 with 254 seats

Screening Time:

Auditorium Access Starts: 6:30pm

Movie Start Time: 7:00 pm

Access Ends: 9:45pm

Special Notes:

#### **Concessions Stand Arrangements:**

Will the concessions stand be open during my screening times? YES

Screening Pricing & Screening Payment:

Number of Tickets Purchased: Adult Group Ticket Rate: \$13.90

Number of Adult Group Tickets Purchased: 254

Child Group Ticket Rate: \$0.00

Number of Child Group Tickets Purchased: 0

Private Screening Total: \$3,530.60

Discount Concessions Details & Payment:

Discount Concessions Packages have been arranged for your event:

**Concessions Discount Price Per Package:** 

**Discount Concessions Details:** 

Discount Concessions Packages must meet the 100 minimum package purchase otherwise the full concessions stand price will be charged. All concessions must be paid for at the theatre on the day of the screening.

Cancellations, Adjustments & Refunds:

If for any reason you need to cancel this Private Screening, or make adjustments to your attendance numbers, please contact me immediately. All cancellations and adjustments must be received 72 business hours prior to the scheduled screening time.

#### Regal Policies:

- 1. For the safety and comfort of all our guests, backpacks, packages and bags of any kind may be subject to inspection. Additionally, while costumes are welcome, Regal does not allow admission to guests wearing masks, face paint or face-obscuring hoods, or possessing weapons, props or fake weapons.
- 2. Movie tickets may not be resold to the general public, nor posted for sale on any public website or social media channel. Failure to adhere to this restriction could result in the cancellation of your screening or event.
- 3. Due to film studio contracts, movies (and showtimes) are subject to change without notice.
- 4. If you are attending an R-rated film, please make sure you and your guests are aware of Regal's policy: Valid IDs will be required to attend "R" movies. You must be at least 17 years of age or have a parent accompany you to view the movie. Age requirements may be higher in certain states and localities. IDs will be checked at the theatre. Children 6 and under are not allowed to attend Rated R features.
- 5. Solicitation Part of our mission to be the best place to watch a movie requires that we host an inclusive and welcoming environment for all guests. In support of our mandate, Regal prohibits solicitation on our premises, which includes displaying support in our theatres for any political candidate, regardless of party affiliation.

#### Payment:

You will be invoiced for the ticket portion of this screening. Please pay upon receipt of invoice per payment terms listed in the invoice.

#### Helpful Tips:

- For movie trailers please visit <u>www.regmovies.com</u>.
- Remember, your auditorium is ready for you 30 minutes before your screening time. Take advantage of that time to greet your guests and get ready for the show.
- Make sure to print this confirmation and present it to the theatre box office or customer service desk upon arrival. The theatre has been notified of your screening and has all of the details mentioned above.
- If you would like physical tickets prior to the screening date, you will need to print this confirmation and take it to the theatre box office or customer service desk. The theatre will be able to print actual tickets for your distribution. Plan accordingly; printing of tickets can take 5-10 minutes. Once tickets have been printed, they are no longer refundable.
- Concessions! As a reminder concessions will need to be paid for at the theatre concessions stand on the day of the screening. Unfortunately, no outside food or beverage is permitted.
- Unfortunately, there are no refunds on unused tickets.
- Check in socially! We encourage you to "check in" on all social channels. If you are already following Regal Entertainment Group, thank you! If not, we'd love to have you join our social conversation.
- Sit back, relax, and enjoy the show!



## STUDENT ORGANIZATION EVENT REGISTRATION FORM



This form must be completed 10 business 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 online 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: Association for Computing Machinery PHONE: DATE: 08/16/201	8					
EVENT CONTACT NAME: EMAIL:						
NAME OF EVENT: Movie Night Fundraiser LOCATION: 1 East Main Street, Alhambra, CA 91801						
EVENT DATE: 10/05/2018 BEGIN TIME: 7:00 pm END TIME: 10:00 pm ESTIMATED ATTENDANCE: 250						
TYPE OF ACTIVITY (THE UNIVERSITY'S GENERAL RELEASE WILL BE REQUIRED FOR CERTAIN EVENTS.)						
✓ PROCEEDS TO BENEFIT						
OTHER: SPEAKER/PANEL						
WILL YOUR EVENT INCLUDE ANY OF THE FOLLOWING? (PLEASE CHECK ALL THAT APPLY)						
SPORTS ACTIVITY OR COMPETITION BEACH/FOREST/PARK CLEAN-UP INTERNATIONAL TRAVEL						
BONFIRE INDOOR/OUTDOOR COOKING DOMESTIC TRAVEL						
AMPLIFIED SOUND ANIMALS						
PLEASE DESCRIBE THE EVENT BELOW (INCLUDE ALL ACTIVITIES):						
The movie will be at a theater Edwards Alhambra						
TOTAL BURNESS AND THE SECOND SECOND STREET OF SECOND SECON						
HOW WILL YOU MARKET THIS EVENT? (CHECK ALL THAT APPLY)						
PRINTED POSTCARDS PRINTED POSTERS/FLIERS SOCIAL MEDIA:  NCLUDE SITE & HANDLE  TAKEN DE LA NUTE POSTCARDS  OTHER:						
WHO WILL BE INVITED? (CHECK ALL THAT APPLY):						
STUDENT ORG. MEMBERS 🗹 CAL STATE LA COMMUNITY OTHER COLLEGES & UNIV. GENERAL PUBLIC GUEST I						
Events intended for the general Cal State LA campus will be listed in the Student Organization Calendar of Events distributed in a biweekly 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 RAISE ANY PROCEEDS TO BENEFIT THE ORGAZNIZATION?  (If yes, please complete statement regarding proceeds to benefit transactions on the back of this form)  NO VYES	30.370.470.22					
WILL A MOVIE BE SHOWN? NO VES (If yes, please attach written proof of viewing rights.)						
WILL THE EVENT HAVE SECURITY? V 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? VNO 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? VNO YES Initials						
If so, please affirm organization members and guests will not consume alcohol.  PLEASE LIST 2 TIPS and SVPT TRAINED MEMBERS ON PAGE 2.						
WILL OFF-CAMPUS MEDIA BE NOTIFIED ABOUT THE EVENT (NEWSPAPER, TV, RADIO, ETC.)? VNO WILL BE INVITED ON PAGE 2.						
DOES THE STUDENT ORGANIZATION WANT TO PURCHASE SPECIAL EVENT INSURANCE FOR THIS EVENT? VIOL YES						
Please be aware that student organization events are not covered for liability or other insurance by California State University, Los Angeles the University-Student Union. Student organization officers or the advisor may be held personally liable. If the student organization would like purchase Special Event Insurance for a particular event, please contact CSI.	or e to					



#### STATEMENT REGARDING PROCEEDS TO BENEFIT TRANSACTIONS

As officers of this recognized student organization at Cal State LA, we affirm that all proceeds raised or assets assigned will be used solely for the benefit of the organization as a whole. Further, it is affirmed that no proceeds or assets of this organizations will accrue to the benefit of any officer, member, or any private person. We also affirm that all proceeds transactions for this event will comply with all University policies and procedures including but not limited to ICSUAM Policy 3141.01 and the Cal State LA Student Organization Funds Administration Policy. Describe the admission charge, registration, participation fee, or any proceeds that will be raised to benefit the organization. Please include how much the organization will be charging for any of these proceeds.

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Each persoi	n will be \$12 per ticket. Funds raised will go	towards confere	nce registrations and projects				
PRESIDENT TREASURER		SIGNATU		DATE: 08/16/2018 DATE: 08/16/2018			
	T ORGANIZATION ACCOUNT #:		124C1921220125	(EMPT STATUS: CSI VERIFICATION			
EVENT G	UIDELINES						
to comply w	g guidelines are provided for the benefit of the ith any of the following guidelines may resul- events and use of facilities. More information	t in disciplinary a	ction taken against the organ	ization including suspension of			
CONDUCT:	The organization assumes full responsibility for the organization to disciplinary action by the Center			ersity policy may subject the participants and/or			
ALCOHOL:	In accordance with Administrative Procedure 019 - Alcoholic Beverages, any event (on or off campus) that involves the consumption of alcoholic beverages requires authorization from the University. Your organization must complete and submit a Request to Serve Alcoholic Beverages form in addition to this Event Registration Form. Please allow at least 3 weeks for this form to be reviewed by the University. Approved alcohol consumption events and events held where alcohol is available (but will not be consumed) require at least two TiPS certified members and two Sexual Violence Prevention & Resources Trained (SVPT) members to be in attendance of the entire event. Additional guidelines may be enforced.						
PUBLICITY:	All publicity material must comply with University Administrative Procedures AP P003 and AP P007. All printed marketing to be used for marketing registered events are required to be stamped by CSI prior to their approved posting. Stamps can be obtained after the event has been registered. All printed material may be posted for up to a period of fourteen (14) calendar days. For student organizations, the "POSTING VALID THRU" stamp must be clearly visible on the face of the posting.						
GENERAL RELEASE:	If your event will require the use of general releated comply with all instructions provided by CSI,						
FOLLOW AL	RE BELOW INDICATES THAT I WILL TAKE RESPO L GUIDELINES SET FORTH BY THE UNIVERSITY. JECT TO CANCELLATION BASED ON MY ORGAN	I ACKNOWLEDGE	THAT THIS EVENT AND ANY AS				
	DRG. OFFICER'S NAME		EASE USE BLUE OR BLACK INK ON	LY) DATE:			
151/1005/10		f g	mb)	08/16/2018			
ADVISOR'S	NAME	<u>PR</u>		08/16/2018 3/16/2018			
ACKNOW! EDCMENT FOR OFFICE LIST ONLY							
CENTER FOR STUDENT INVOLVEMENT (U-SU 204)  CENTER FOR STUDENT INVOLVEMENT (U-SU 204)  CENTER FOR STUDENT INVOLVEMENT (U-SU 204)							
CSI VERIF	IES THE ORG. IS RECOGNIZED BY THE UNIVERS	SITY		31718			
ASSISTANT DEAN OF STUDENTS: WELLNESS & ENGAGEMENT							
GENERAL RELEASE REQUIRED FOR ALL PARTICIPANTS? NO YES DATE REQUIRED:							
NOTIFICATIONS:							
PUBL	IC AFFAIRS DATE:		ATHLETICS	DATE:			
DEPT	OF PUBLIC SAFETY DATE:		FACILITIES USE COORDINATOR	DATE:			
OTHE	R:DATE:		U-SU BUSINESS OFFICE	DATE:			

NOTES OR UPDATES: (TIPS-CERTIFIED/SVPT TRAINED MEMBERS, SOCIAL MEDIA SITES/HANDLES, INVITED MEDIA, ADDITIONAL INFORMATION/REQUIREMENTS)