

University Event **Booking Form**

Approver - Non-conferencing events and spaces - *Any key teaching associated space during the academic year teaching period*, e.g. Eden Building and Foyer, Gateway Building and Foyer, I3 Building, Foyer and I3 Courtyard, Health Sciences Building and Foyer, Gateway Building and Foyer, Hope Park Sports Hall and any Student Union event. Outline approval is required by the Gateway Team. Send your event plans, initial risk assessment outline and event booking form to: gateway@hope.ac.uk.

Approver - Conferencing events and spaces - *Any conferencing and event area that is not a key teaching associated space during academic year teaching periods*, e.g. Conference Centre, Eden Arbour Room, Capstone Foyer, Cornerstone Great Hall and Mezzanine Gallery, Cornerstone Foyer, Angel Fields, FML Foyer, Fresh Hope, Our Place and all outdoor spaces on campus, excluding I3 Courtyard. Outline approval is required by the Conferencing and Events Team. Send your event plans, initial risk assessment outline and event booking form to: conferences@hope.ac.uk

A standard event should prompt notification no less than **2 weeks** before the event. A large-scale event should prompt notification no less than **4 weeks** before the event. Further information is provided in the Events Safety Management Code of Practice.

of Practice.					
Organiser Details					
Lead Event Organiser Name:					
Department:					
Event Details					
Intended Building/ Location:			Intended Date:		
Time From:			Time To:		
Brief Description of Intended Event:					
Number of Staff Supporting Event:		Are you aware of the location capacity?	☐ Yes ☐ No	Is it suitable for your event?	☐ Yes ☐ No
Is there potential for disruption to learning and teaching at the event location?					☐ Yes ☐ No
If the above is yes, please comment further below on how this will be managed.					
Once complete, please submit this form along with outline risk assessment and any related plans and information to the relevant event approver.					
Approval Granted:	☐ Yes ☐ No		Approval Date:	Approval Date:	
Approver Name:					
Any Comments/Additional Requirements or Changes from Approver:					