

Student Protest and Demonstration Registration Form

Please read each question and fill out the information accordingly. The information collected will be used to provide appropriate support and resources to mitigate risk and protect participants' rights. The collection of this information is not an attempt by the University to censor or otherwise limit content or viewpoint, but rather to advise organizers regarding applicable standards for time, place, and manner and to ensure the safety of participants.

Name of Individual Registering	g Gathering/Demonstration:		
Email Address:	Stud	ent ID#:	
Best contact phone number:	est contact phone number: Name of Sponsoring Organization:		nization:
Title/Name of Demonstration:			
Start/End date of Demonstratio	n (ex: 8/1/16-8/1/16):		
Time Duration of Demonstration	on (ex: 1-4pm):		
Location:			
Has a space reservation been m	ade through EMS?	YES:	NO:
Description of Demonstration:			
Number of Demonstration Part	icipants Anticipated:	_	
•	who are not affiliated with the Univ y effect your event, instead it will	2 1 0	
Do you anticipate having media	a present at your demonstration?	YES:	NO:
Once this form has been submit of the Dean of Students to disc	tted and reviewed, the organizer was the demonstration plan.	ill be invited to meet v	vith a representative of the Office
	I have read and filled out the infortest and Demonstration Policy, wh		
□ I Agree Si	gnature of Registrant:		