Annex IV

Event Authorisation Request

University Events

This Request does not replace the mandatory notifications to authorities required by law, nor the permits and notifications stipulated in the University's regulations.

To be submitted to the e-mail address **rendezveny@uni-pannon.hu**

TO BE COMPLETED BY the Directorate of Communication:

Date of submitting the Request:

Name of person receiving the Request:

Signature of person receiving the Request:

TO BE COMPLETED BY THE REQUESTOR:

1. **Event organiser:**

Full name/name of organisation: .....

Birth name: .....

Address/registered address: .....

Place and date of birth: .....

Mother's name: .....

Tax ID number/tax number:.....

Phone: .....

E-mail address: .....

Additional organiser of the event: *[This section must be completed if:* ***a)*** *the event has additional organisers besides the organiser indicated above, or* ***b)*** *if the organiser indicated above is not a natural person, the details of the natural person authorised to act on behalf of the organiser must be provided,* ***c)*** *if the operational organiser and the financial/administrative organiser are different persons. May be expanded if necessary!]*

Full name/name of organisation: .....

Birth name: .....

Address/registered address: .....

Place and date of birth: .....

Mother's name: .....

Tax ID number/tax number: .....

Phone: .....

E-mail address: .....

Full name/name of organisation: ..... (financial organiser)

Birth name: .....

Address/registered address: .....

Place and date of birth: .....

Mother's name: .....

Tax ID number/tax number: .....

Phone: .....

E-mail address: .....

2. Title of the event: .....
3. Venue of the event: .....
4. Venue reservation date and time: .....
5. Start date and time of the event: .....
6. Expected end date and time of the event: .....
7. Expected number of participants: people
8. The event is □ subject to notification □ subject to authorisation
9. Classification of the event:

   □ PRIVATE □ PUBLIC *(Please mark the appropriate option with an 'x')*

10. I request permission to use the name, coat of arms or logo of the University of Pannonia[1]:

    □ YES □ NO *(Please mark the appropriate option with an 'x')*

11. I request the provision of a venue at the University of Pannonia for the event[2]:

    □ YES □ NO *(Please mark the appropriate option with an 'x')*

[1] May be authorised in accordance with the University's Regulation on the Use of the Name of the University of Pannonia

[2] May be requested in accordance with the Asset Management Policy of the University of Pannonia

Specification of the requested venue (exact name of the venue):

.....

I request the arrangement/setup of the event venue indicated in Section11:

□ YES □ NO

12. I wish to use equipment provided by Egyetemi Centrum Kft. (prior consultation with Egyetemi Centrum Kft. is required)

□ YES □ NO *(Please mark the appropriate option with an 'x'. If YES, please specify what equipment is required)*

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13. I wish to use university sound or video equipment for the event (prior consultation with the University's sound technician is required)

□ YES □ NO *(Please mark the appropriate option with an 'x'. If YES, please specify what equipment is required)*

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14. Full list of official permits required for holding the event:

The event venue possesses the necessary official permits: .....

15. Type of music service at the event:

□ live performance □ recorded music *(Please mark the appropriate option with an 'x')*

16. Will catering services be used at the event?

□ YES □ NO *(Please mark the appropriate option with an 'x'. If YES, please provide the name and contact details of the partner)*

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(a) I wish to use cold catering service □ YES □ NO

(b) I wish to use hot catering service □ YES □ NO

17. Will beverage services (provided by an external contractor) be used at the event?

□ YES □ NO *(Please mark the appropriate option with an 'x'. If YES, please provide the name and contact details of the partner)*

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18. Does the organiser intend to engage subcontractors for the event?

□ YES □ NO *(Please mark the appropriate option with an 'x')*

If yes, name and contact details of the subcontractor:

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19. Purpose and brief description of the event:

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20. Does the event have house rules?

□ YES □ NO *(Please mark the appropriate option with an 'x')*

If the event has house rules, they must be attached.

By signing this document, I declare that I am familiar with the relevant legislation and its provisions, as well as the rules set out in the Regulation on the Organisation of Events at the University of Pannonia, and that I will comply with them during the organisation and conduct of the event.

I acknowledge that programmes, quizzes or games that violate human dignity, offend public morals or endanger the physical safety of participants may not be held at the event.

I acknowledge that, if the applicable regulations are not complied with, the Rector and the Chancellor of the University may prohibit the start or continuation of the event.

I acknowledge that, during the organisation and conduct of the event, coordination with the administrative/financial organiser and with the relevant organisational units of the University is the responsibility of the Organiser submitting this Request.

Dated in: ....., on __ _____:

.....	.....
Organiser's name and signature	Authorised signature of the financial/administrative organiser

I authorise/don’t authorise the event, Veszprém, __ _____ 20__:

.....

Rector

l.s.

I agree/don’t agree, Veszprém, __ _____ 20__:

.....

Chancellor

l.s.

Annexes:

- Schedule of the Organisation of the Event
- House Rules of the Event
- Budget Plan of the Event