

## Summer Programs PRIOR ARRIVAL FORM

(This form due 30 business days prior to your camp's campus arrival. It can be sent to the Office of University Events & Conferences.)

Program Name:

Dates of Program:

Program Coordinator:

Program Coordinator Phone #:

### HOUSING COUNT

#### RESIDENCE HALL BEDS

# of Residence Hall beds for female campers:

# \_\_\_\_\_

# of Residence Hall beds for male campers:

# \_\_\_\_\_

# of Residence Hall beds for female staff/leaders:

# \_\_\_\_\_

# of Residence Hall beds for male staff/leaders:

# \_\_\_\_\_

**Total number of Residence Hall beds:**

# \_\_\_\_\_

#### PARTICIPANT AND STAFF/LEADER COUNT

# of participants and staff housed in residence halls:

**Participants:**

**Staff:**

**Total:**

# \_\_\_\_\_

# \_\_\_\_\_

# \_\_\_\_\_

#### COMMUTER COUNT

# of commuter participants and staff:

**Participants:**

**Staff:**

**Total:**

# \_\_\_\_\_

# \_\_\_\_\_

# \_\_\_\_\_

## FOOD SERVICE

[illegible]

## Dining Hall Meals

List the numbers of individuals eating each meal for each day of your program excluding commuters. If a meal will not be eaten in the Baugh Dining Hall, please indicate. If your group is divided into two groups please fill out #1 and #2.

[illegible]

Number of commuters paying daily for their own meals: #

**Dining Hall Identification\*:**\_\_\_\_\_

**(Assigned by the Office of Summer Programs)**

*\*All youth program participants must wear wrist bands.*

**CAMPER CHECK-IN/REGISTRATION**Date: \_\_\_\_\_ Time (any time *after* 2 p.m.): \_\_\_\_\_

Location: \_\_\_\_\_

**CAMPER CHECK-OUT/DEPARTURE**Date: \_\_\_\_\_ Time (any time *before* 10 a.m.): \_\_\_\_\_

Location: \_\_\_\_\_

**STAFF/LEADER CHECK-IN/REGISTRATION**Date: \_\_\_\_\_ Time (any time *after* 2 p.m.): \_\_\_\_\_

Location: \_\_\_\_\_

**STAFF/LEADER CHECK-OUT/DEPARTURE**Date: \_\_\_\_\_ Time (any time *before* 10 a.m.): \_\_\_\_\_

Location: \_\_\_\_\_

**MEDIA SERVICES**

Indicate which service is needed:

Room: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

☐ Projector    ☐ Computer☐ Sound    ☐ Mic☐ TV/DVD

Room: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

☐ Projector    ☐ Computer☐ Sound    ☐ Mic☐ TV/DVD

Room: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

☐ Projector    ☐ Computer☐ Sound    ☐ Mic☐ TV/DVD

Room: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

☐ Projector    ☐ Computer

Group Name: \_\_\_\_\_

☐ Sound      ☐ Mic

☐ TV/DVD

Room: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

☐ Projector      ☐ Computer

☐ Sound      ☐ Mic

☐ TV/DVD

Will your group be using a computer lab? ☐ Yes ☐ No

**INTERNAL CAMPS, Please Note: Filling out the Media Services portion of this form does *not* guarantee that your requested equipment and/or service will be available. To ensure that the requested equipment and/or service is available and prepared for you, please fill out a Media Services Request by [clicking here](#), or contact the Office of University Events & Conferences with questions or concerns.**

**FACILITIES SET-UP**

Request for tables and chairs.

Room: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Needs: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Room: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Needs: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Room: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Needs: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please Note: filling out the Facilities Set-Up portion of this form does *not* guarantee that your requested equipment will be available. To ensure that the requested equipment is available and prepared for you, please fill out a setup form for the respective space ([Dunham Theater](#), [Belin](#)**

Group Name: \_\_\_\_\_

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Chapel, McNair Hall, Bradshaw Fitness Center, or the General Form for all other spaces), or contact the Office of University Events & Conferences with any questions or concerns.

This section *MUST* be completed.

On-site contact person: \_\_\_\_\_

On-site contact's cell phone number: \_\_\_\_\_

On-site contact's housing location: \_\_\_\_\_

Signature of Coordinator \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_