Wright State University

Demonstrations/Marches Registration Form

In accordance with University Policy 1260.04 Operational Procedures for Demonstrations and Marches, this form must be submitted and approved not less than one business day prior to the planned activity if the number of participants is expected to be 100 individuals or less. If the number of anticipated participants may or will exceed 100 participants, this form must be submitted and approved not less than 3 business days prior to the planned activity. This form must be returned to the Office of the Dean of Students, 224 Student Union.

<table>
<thead>
<tr>
<th>Date of Event</th>
<th>Start Time</th>
<th>End Time</th>
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Estimated Attendance ______________

Name of the Event _____________________________________________________

Sponsoring Organization _________________________________________________

Responsible Person(s)       Name                                Phone Number
______________________________________________________________________________
______________________________________________________________________________

Location of Demonstration _____________________________________
_____________________________________________________________________________________

The Route of the March (if applicable) ____________________________________________
_____________________________________________________________________________________

Security Plans and List of Sponsors ____________________________________________
_____________________________________________________________________________________

Describe Sound Devices ______________________________________________________

Name of Speaker(s)
______________________________________________________________________________
______________________________________________________________________________

OFFICIAL USE ONLY

Date and Time Received _____________________________

Group Representative Given Policy Statement      Yes ____      No ____

Approved _____      Denied _____     Security Plans Discussed with WSUPD   Yes ____      No ____

Dean of Students or Designee Signature ______________________  Date ______________________

Chief of Police or Designee Signature ______________________  Date ______________________

Cc:  WSUPD
     Director of Residence Life and Housing
     Director of Student Involvement / Leadership

President’s Office
Facilities Planning and Management
Communications and Marketing