# ACT ON RACISM PERFORMANCE REQUEST FORM

**Act on Racism Performance Request Form**

**Thank you for considering an Act on Racism performance. Please consider the following guidelines:**

* Please complete the form and submit it to aor@gvsu.edu.
* Submit the form approximately two weeks (14 days) prior to the first desired date.

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| Contact Information |
| **Name:**Click here to enter text**Title:**Click here to enter text**Organization (optional):**Click here to enter text**E-mail Address:**Click here to enter text**Phone Number:**Click here to enter text |

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| Performance Location |
| **Will this event be hosted at Grand Valley?** [ ] Yes [ ] No**If yes, which campus?** [ ] Pew [ ] Allendale**Building:** Click here to enter text**Room Number:** Click here to enter text**Off Campus: Venue Name:** Click here to enter text **Venue Address:** Click here to enter text |

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| Performance Date and Time |
| Below please list the dates and times you would like to host an event:**Option #1:**Click here to enter a date **Time:** Choose a time**to** End time**Option #2:**Click here to enter a date **Time:** Choose a time**to** End time**Option #3:**Click here to enter a date **Time:** Choose a time**to** End timeWould you like more than one performance? [ ] Yes [ ] NoAre the dates and times flexible? [ ] Yes [ ] No |

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| Performance Details  |
| Who will be the target audience (ex. Student Athletes)? Click here to enter textWhat will be the size of the audience? Click here to enter textWill this performance be open or closed to the public? Choose an item |
| **Summarize what you hope to achieve from the performance. Please include any specific areas you would like to approach, or skits you would like reenacted:**Click here to enter text. |

**Summarize any additional details you would like us to be aware of:**Click here to enter text.