

## SPIRIT APPEARANCE REQUEST FORM SAN DIEGO STATE ATHLETICS

Your Name:	Name of Organization:		
Phone: ()	Email:		
Your organization is:	Corporation/Event Company Representing a Client		Non-Profit/Charitable Agency
· · · · · · · · · · · · · · · · · · ·	SDSU Organization; e.g. Sorority, Stu	THE WALL AND A	NCAA School, Conference
	Other:	是為	
Description of Promotional/Fundrais	ng Activity (Attach copy of flyer, if av	ailable):	
Group(s) requested for this event: B	andCheer	Dance	Diamonds
Date of Activity:	Location o	f Activity:	
Activity Start Time:	Time group members n	eed to appear:	Duration of appearance:
Will the band be marching or perform	o play? Specific song rec ning in one location? Please describe.	min.	
Requested attire:Marchi	ng Band Pe	p Band	Practice Attire
Will the group perform on a stage?	Cheers, Fight Song, etc.)  What are the dimens  Do you have recordings Uniforms  Pr	sions of the space on wh	or other music you would like to use?
<u>Dance</u>		O DO DO	
How many routines is the group exp	ected to perform?	Specific style of do	ince requested:
Will the group perform on a stage? What are the dimensions of the space on which they will perform? Do you have recordings of the SDSU Fight Song or other music you would like to use? Requested attire: Game Uniforms Practice Attire			
<u>Diamonds</u> What is expected of the group?			
Will the group perform on a stage?	What are the dimen	sions of the space on wh	ich they will perform?
	ny, will group(s) receive while partici Lunch Il for-profit businesses and events and	_	Snack per event basis during the event approval process.
X	ntative		Date

 $4\ weeks\ prior\ to\ appearance,\ please\ return\ to\ Sara\ Nimmo,\ Assistant\ Director\ of\ Marketing,\ at\ snimmo@sdsu.edu.$  Completion\ of\ form\ does\ not\ guarantee\ accommodation.