

FACILITY USE FORM - EXTERNAL

Return this form to the Jennie Ayres, Business Services, along with your **\$100.00 non-refundable application fee**. Full payment is required four weeks prior to using the facility, and is non-refundable if canceled less than fourteen days prior to scheduled activity. If Atlantic Cape Community College cancels, full payment will be returned.

Telephone: 609-343-5039 - Fax: 609-343-5002 - Email: jayres@atlantic.edu

Date of Application: _____

Room/space requested _____

Organization _____

Address _____

Contact person _____

Telephone _____ Email _____

Event title _____

EVENT DETAILS Describe event _____

EVENT DATE(S): _____ ARRIVAL TIMES _____ EVENT TIME _____ END TIME _____ ADDITIONAL DATE(S): _____ ARRIVAL TIMES _____ EVENT TIME _____ END TIME _____

Person responsible on site: _____ Cell Number _____

Number of people expected _____ Is event open to the public?

Yes No Admission/tuition charge \$ _____

Will tickets be sold, or money collected at the door? Yes No If yes, amount \$ _____

Special parking requirements: (busses, vans, handicapped) Yes No If yes, specify _____

FOOD SERVICE: Yes No (Must be through College food service vendor.)

EQUIPMENT: (Indicate amount needed – show location of the equipment on reverse side of this form)

Tables _____ Chairs _____ Tablet armchairs _____ Podium Microphone(s) _____

CD/Music DVD PowerPoint (Includes Screen) Flip chart(s) _____

Other _____

OTHER NEEDS: (Please describe) _____

It is agreed that approval of this application is subject to regulations specified in the Policies and Procedures Manual provided by Atlantic Cape Community College. In no way will there be an implication in any verbal or written statement, the endorsement or sponsorship by the college of the activity. Any advertisement for this event using Atlantic Cape's name and/or location must be approved by Atlantic Cape prior to using said advertisement. If Atlantic Cape closes to the public because of reasonable concern due to weather emergencies, power outages, water outages, civil unrest, threat to national security or any other occurrence which may threaten the safety of persons on campus, events may be canceled. The college shall not be responsible for any costs to the Sponsor resulting from a cancellation or delay due to such a decision. The college will not charge for its contracted facilities and services that were not used due to cancellation by the college. Failure to accept and abide by these terms will result in cancellation of this contract. Any and all costs associated with this cancellation, incurred by the applicant, will be borne by the applicant. Client agrees to indemnify, save and hold harmless Atlantic Cape Community College and its directors, officers, employees, representatives or agents against any and all demands, claims, suits, losses, costs or damages arising out of claims of any nature, type or description in any way arising out of or in any way connected with this Agreement.

Authorized signature & Title

Date

=====

This section for college use only

This is **not a valid** contract unless signed by the President or Executive Director of Administration and Business Services.

Certificate of Insurance received Yes No

Date received _____ Action taken: Approved: Yes No

Basic Fee \$ _____ Extra cost \$ _____

Total due \$

 Jennie Ayres, Events Specialist, Business Services

 Date

 August Daguila, Dean of Administration and Business Services

 Date

USE THE BACK OF APPLICATION FOR ADDITIONAL INFORMATION OR TO SHOW ROOM LAYOUT