



MERCED COLLEGE OFFICE OF FACILITIES/EVENTS
3600 "M" STREET • MERCED, CA 95348-2898
CALL (209) 381-6593

APPLICATION FOR USE OF COLLEGE FACILITIES

Facility \_\_\_\_\_ Name of Applicant \_\_\_\_\_

Group Represented \_\_\_\_\_ Address \_\_\_\_\_

Phone No. \_\_\_\_\_ Purpose of Use \_\_\_\_\_

Expected Attendance \_\_\_\_\_ Open to Public [ ] Yes [ ] No Admission [ ] Yes [ ] No

If yes, for what purpose will proceeds be used? \_\_\_\_\_

DATE/TIME OF PROPOSED USE (Doors will not be open prior to hours specified)

Do you have keys to facility? [ ] Yes [ ] No

Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_ Days of Week \_\_\_\_\_

Starting Time [ ] a.m. [ ] p.m. TO [ ] a.m. [ ] p.m. Time Event Starts [ ] a.m. [ ] p.m.

ADDITIONAL DATES/TIMES: \_\_\_\_\_

\*If you need use of any equipment, services, and/or special arrangements, please indicate:

No. of Chairs \_\_\_\_\_ No. of Tables \_\_\_\_\_ Podium \_\_\_\_\_ Microphones \_\_\_\_\_

Other \_\_\_\_\_

\*Charges are incurred for use of equipment.

COMMENTS: (Please provide diagram for any special needs for floor plan arrangement.)

FOOD SERVICE: Food Service Requested? Yes [ ] No [ ]

PARKING: Parking permit required on Merced College Campus.

STATEMENT OF INFORMATION

The undersigned, acting as an authorized agent of \_\_\_\_\_ states that the organization will be responsible for use fees (if any) and any damage sustained to the school premises, furniture, or equipment because of our occupancy of said premises. The organization agrees to abide by and enforce the rules, regulations and policies of the Merced Community College Board of Trustees governing the use of school premises. Said policies have been read, signed, and submitted with this application by an officer of the organization making this request. It is further understood and agreed that we will hold harmless and indemnify Merced College, its officers, appointed or elected officials, employees and agents from any and all liability, claims or lawsuits resulting from our use or occupancy of the above described Merced College Facility. The undersigned further states that, to the best of his/her knowledge, the school property for use of which application is hereby made will not knowingly be used for the commission of any illegal act or crime, including Penal Code Sections 11400 and 11401. This statement is made under the penalty of perjury.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Dept. or Area \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE

Facilities Approved: Yes [ ] No [ ] Inv. # \_\_\_\_\_

ESTIMATED CHARGES: Administrative Fee: \$ \_\_\_\_\_ Security Services: \$ \_\_\_\_\_
Events Staff Fee: \$ \_\_\_\_\_ Technician Fee: \$ \_\_\_\_\_
Facility Use Fee: \$ \_\_\_\_\_ Utilities Fee: \$ \_\_\_\_\_
ESTIMATED TOTAL \$ \_\_\_\_\_

Comments \_\_\_\_\_

A deposit of \_\_\_\_\_ is required by \_\_\_\_\_ (if estimated total exceeds \$1000, the district requires a 2/3 deposit no later than two weeks prior to the event).

Certificate of Insurance AND Additional Insured Endorsement Required: Yes [ ] (due date \_\_\_\_\_) No [ ]

NOTE: Failure to provide an Additional Insured Endorsement will void Application for Use of Facilities.

Merced College Authorized Representative's Signature \_\_\_\_\_ Date \_\_\_\_\_

PRINT

SUBMIT