



## Solano Community College Application

Date: \_\_\_\_\_

Organization \_\_\_\_\_

**Please Check All That Apply**

<b>Description of Organization:</b>	
Education	<input type="checkbox"/>
Community Group	<input type="checkbox"/>
*Non-Profit	<input type="checkbox"/>
Public Agency	<input type="checkbox"/>
Private Organization	<input type="checkbox"/>
Other	<input type="checkbox"/>
*IRS ID # _____	

<b>Type of Event:</b>	
Educational	<input type="checkbox"/>
Fundraiser (non-profit)	<input type="checkbox"/>
Athletic/Recreational	<input type="checkbox"/>
Clinic	<input type="checkbox"/>
Camp	<input type="checkbox"/>
Practice	<input type="checkbox"/>
Competition	<input type="checkbox"/>

Authorized Representative \_\_\_\_\_

Phone (day) \_\_\_\_\_ Phone (eve) \_\_\_\_\_

Cell Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail Address \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Purpose of Use \_\_\_\_\_

Estimated Attendance \_\_\_\_\_ Admission Fee \_\_\_\_\_

**Facility Requested** \_\_\_\_\_

\_\_\_\_\_

**Date(s) Requested** \_\_\_\_\_

\_\_\_\_\_

**Event Starting Time** \_\_\_\_\_ **Setup Starting Time** \_\_\_\_\_

**Event Ending Time** \_\_\_\_\_ **Cleanup Hours** \_\_\_\_\_

**Equipment, Services & Set-up:** Set-up and break down will be determined by Solano Community College and added to the total cost of facility use. Provide a diagram of the requested set-up on the back of this sheet. Be complete – late requests for equipment and services cannot be accepted or filled. Note below how many of each item:

**Equipment**

Chairs _____	Podiums _____	Others _____
Tables _____	Free Standing _____	
6' _____	Desk Top _____	
8' _____	Garbage Cans _____	

**Will your group be serving refreshments?** \_\_\_\_\_ **No** \_\_\_\_\_ **Yes. Where?** \_\_\_\_\_

*I have read the governing use of this facility and agree to abide by all the College's stipulations regarding use including providing liability insurance.*

\_\_\_\_\_

\_\_\_\_\_ Representative's Signature

**Internal Use Only**

**Office Use Only:**

**Personnel**

Custodian _____	Groundskeeper _____	Electrician _____
Police _____	Lifeguard _____	Other _____

Please provide us with a diagram of your requested event set-up. Be as specific as possible and include placement of any audio-visual equipment, podium, tables, chairs, etc. This diagram will be used by our maintenance staff to prepare for your activity.

Set-up for: \_\_\_\_\_

