



Lifelong Learning and Recreation Center Facility Use Form

Today's Date: _____ Organization Name: _____

If organization is NCC, please specify which department/division: _____

Activity/Event Name: _____

Representative: _____

If Representative is a staff member of NCC, please indicate which department: _____

Billing Address: _____

Phone Number: _____

Email Address: _____

Requested Facility Space:

- ALL LLRC [LLRC will be closed to all other parties/members for your event]
- Multi-use room - Large
- Multi-use room - #1
- Multi-use room - #2
- Large Court
- Small Court #1
- Small Court #2
- Lobby/concessions/kitchen
- North Fitness Area
- East Fitness Area
- Strength Training Area
- Track

Type of Event [check all that apply]:

- Non-Profit
- Profit
- Academic
- Athletic
- NCC Affiliated

Date of ActivityEvent/Class: _____ [day/month/year/day of the week]

Time of Activity/Event/Class: _____ Start time: _____ End time: _____
[Please include set up and tear down times in your start and end times]

Number of people expected: _____

Please describe the purpose/topic of your event: _____

Special equipment/furniture set up required:

- Yes [if possible, please attach a proposed layout of furniture/equipment set up]
- No

Special AV/equipment needs:

- Microphone/Speaker system
- Screen(s)
- Computer/Internet
- Stereo/CD player
- TV/VCR/DVD
- Tables - please indicate anticipated #:
- Chairs - please indicate anticipated #:
- Podium
- Fitness Equipment - please specify:
- Other - please specify:

Will food be served at this event?

- Yes
- No

If yes, please specify:

- Light refreshments
- Meal
- Concessions for attendees
- Beverages only
- Other - please specify: _____

[over]

Additional notes/information that may be pertinent to the facility use

and the approval process:

*Additional charges may be incurred for facility use including: additional hours for LLRC staff/NCC maintenance staff due to additional opening/closing hours, setup/teardown, clean up; use of additional equipment/technology; etc. If your event requires more equipment/tables/chairs than the LLRC is able to provide, we will work with you to acquire/rent additional equipment/tables/chairs. This could require billing your organization for any additional fees incurred through this process.

The undersigned Representative has requested use of the facility/equipment as listed. As the Representative for the requesting organization, I hereby release NCC and the LLRC from any liability during my organization's event and accept full responsibility and liability for all parties involved/participating in my event. I had read the policies and procedures for use of the LLRC, I have relayed that information to my organization, and I will ensure that we adhere to those policies and procedures.

Representative Signature

Date

LLRC OFFICE USE:

Facility Use Approved:

Yes

No

If no, reason(s) for denial:

Coordinator of Lifelong Learning and Recreation Center Signature

Date