

Facilities Use Request Form

Group Requesting Space: ____ Campus Group ____ For-Profit Organization ____ University-Related Group ____ Non-Profit Organization

Organization/Individual Requesting Space:

Sponsoring Organization or Office (if required by UWS Ch. 1): _____

Contact Name & Title: _____ Telephone: _____ (Ext. _____)

Email: _____ Fax: _____

Address: _____ City: _____ State: _____ Zip: _____

Type of Event (please provide description of event): _____

Number of persons attending: _____ Is a fee charged for this event: Yes ☐ No ☐ (Check One) If Yes, Fee Amount: \$ _____

Building/Room/s Requested: Please rank in order of choice (1st, 2nd, etc.) If promotion materials are distributed, renter agrees to list the name of the facility/room as stated below.

Herbert L. Williams Theatre ____ Cafeteria ____ Student Union ____ Gymnasium ____ Classroom ____ Other ____

(please mark classroom choice) *Lecture* Classroom: ____ M-117 *Regular* Classroom: ____ M-107 ____ M-109 ____ M-110 ____ L-101 ____ L-102 ____ F-108

Dates Requested:

Date(s) Door Opening/Closing Time Start and Stop Times

First Choice _____

Second Choice _____

Equipment Requested: (Mark requested equipment)

Instructor Computer & Projector ____ Easel ____ Do you require lighting? ____ Stage ____ Spotlight

Student Computer/s (number: ____) TV/VCR ____ Are Microphones needed? ____ Wireless ____ Stand

Overhead Projector ____ Slide Projector/Screen ____ Any special request? *Please be specific*

Podium ____ Piano ____

White board ____ Will you be using Power Point? ____

Food Service Requested: ____ Yes ____ No (Check One) *If yes, please make arrangements at least 10 days in advance with Karla Sullivan at 715-735-4300 x4338 or email Karlene.sullivan@uwgb.edu*

Will Alcoholic Beverages Be Served at this Event? ____ Yes ____ No (Check One)

If Yes, UW-System guidelines require approval of CEO, as well as other restrictions. Please see Policies and Procedures for more information.

Room Setup Requested:

Meeting Format (chairs placed around a table) ____ Lecture Format (podium and chairs for an audience) ____

Banquet or Dinner ____ Other ____

Format Specific to Facility (see site-specific form for provisions) _____

All printed materials or publications must have the following disclaimer listed: "UW Green Bay- Marinette Campus rents its facilities to outside organizations and groups and abides by UW System facilities usage policies and county property policies. UW Green Bay- Marinette Campus assumes no role in sponsoring or endorsing any views expressed in any events scheduled in its rented facilities."

On behalf of the organization I represent, I assume responsibility for the use of the facility in accordance with the University of Wisconsin Green Bay – Marinette Campus Facilities Use Policies and Procedures. Please see reverse for all applicable policies and conditions. I understand that non-compliance with University policies could result in facilities use being revoked.

Signed _____ (for Organization) **Date** _____

Campus Approval: Actual fee will be determined following the event. A deposit may be required up to the full amount of any University incurred expense to host the event.

Estimated Usage Fee: Facilities Fee: \$ ____ Maintenance Fee: \$ ____ Technical Support Fee: \$ ____ Other Fee \$ ____

Total Usage Fee \$ ____ Deposit Required: \$ ____ Make checks payable to UW Green Bay-Marquette Campus.

Date Due: _____

Comment: _____

By: _____ Title: _____ Date: _____