



Application for Use of Facilities

THE UNIVERSITY OF TENNESSEE AT CHATTANOOGA

Exterior Spaces

UTC Campus

Phone: 425-4203

Fax: 756-5559



Application must be **fully completed** in order for request to be considered.

Event Title: _____

Event Purpose: _____

Sponsoring Group(s): _____

Responsible Contact Full Name: (Must be present) _____ Email: _____

Street Address or UTC Dept.: _____ Phone: _____

City/State or Responsible University Account #: _____ Fax: _____

Room(s)/Location Requested: _____

Day(s) and Date(s) of Event: _____

Hours Requested (Start): _____ AM/PM (End): _____ AM/PM Actual Event Hours (Start): _____ AM/PM(End): _____ AM/PM

Guests Include: Campus Only General Public Number to Attend? _____ Admission Charged? Yes No

Check all applicable classifications: Meeting Conference/Workshop Non-Profit Use Profit Use Entertainment

Non-UTC Political Religious Solicitation Other

Co-Sponsored

Speaker/Lecture Name & Topic _____

Requested University Services

Any incurred expenses will be billed to the requesting group or contact.

Food and/or Beverages Served? Yes No Group must contact Aramark Food Services for all food and beverages @ 425-4200.

Audio/Visual Needs Requested? Yes No Group must contact Media Resources @ 425-4197.

Music or Amplified Sound Used? Yes No Group must follow community standards and not affect academic classes.

Setup Requested? Yes No Group must contact Facilities for setup details @ 425-4075.

** Required for all tables, chairs, stage, clean-up, electricity, etc. **

Sign _____ Date _____

I have read and understand this agreement, and I am aware of the Facilities Use Terms and Conditions on the attached page. I acknowledge that all listed information is accurate, and I will let the appropriate department know if anything changes before the event. I understand that failure to meet any conditions of this agreement shall result in a cancellation at any time. I understand that this form is an application, and the event should not be promoted until confirmation is received. I will also be responsible for any billing for services incurred.

UNIVERSITY USE ONLY

Approved _____ Not Approved _____ Referred to Facilities Use Committee _____

Comments _____

Student Development _____ Setup _____

Parking _____ Security _____

Facilities Management _____ Food Services _____

UTC Action: Rental Amount _____ Contract _____ Insurance _____

Scheduled _____ Date _____ Fees _____ Receipt # _____

Facilities Use Committee Approved _____

Date Received:

Booking Number:

Confirmation Sent:

Facilities Use Terms and Conditions

Non-University related requests must be received no less than 4 weeks prior to the event. University related events require 72 hours prior notice.

Safety and Risk Management Statement

In consideration for the permission of the University of Tennessee at Chattanooga to allow use of premises, the undersigned agrees to assume all responsibility and legal liability arising out and in the use of the aforementioned property. The undersigned further agrees to indemnify, save and hold harmless the University of Tennessee at Chattanooga and its employees from any liability arising out of the use of this property. Further, the undersigned agrees to abide by all the rules, standards, or reasonable requests made by the University of Tennessee at Chattanooga relating to the use of these facilities and to adhere to all safety/fire code requirements as set forth by the University and to instruct participants to adhere to same.

Depending on the type of liability exposure, I understand that I may be asked to provide proof of current liability insurance and a certificate of insurance evidencing the University of Tennessee at Chattanooga as listed additional insured.

Equal Opportunity Statement

The University of Tennessee at Chattanooga is an equal employment opportunity/affirmative action/Title VI/Title IX/Section 504/ADA/ADEA institution.