

Date: _____

Record: _____

Booking: _____

Facilities Request

THE UNIVERSITY OF TENNESSEE AT CHATTANOOGA

University Center Room 226, Dept 1501 425-4455 Fax: 425-2243 <i>www.utc.edu/uc</i>	OR	Continuing Education Siskin Memorial Room 118, Dept 5255 425-4344 Fax: 425-4170
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*Non-University related requests must be received no less than 4 weeks prior to the event.
 *University related events require 72 hours prior notice.
 *All events, facilities and equipment rentals are subject to approval by the Facilities Use Committee or Departments.

Event Title _____

Event Description *(Specific)* _____

Department Name/Organization _____

Day(s) and Date(s) of Event _____ Hours Requested (Start) _____ (End) _____

Requesting Room? Yes No Actual Event Hours (Start) _____ (End) _____

Room(s)/Location Requested _____

Number to Attend? _____ Campus Invited? _____ Public Invited? _____ Admission Charged? _____

Selling/Registering/Fundraising/Soliciting? Yes No

If yes, describe: _____

Contact _____ Phone _____

Address or UTC Dept No. _____ Email _____

Responsible University Account No. _____ Fax _____

Requested University Services

**Any expenses for this event incurred by the University Center or other University Departments will be billed to the department/organization/sponsor.
 Do not advertise this event until you have received a printed confirmation

Food and/or Beverages served? Food Beverages
(Sponsor must arrange all food and/or beverages through Aramark Food Services 425-4471)

UTC Facilities Planning Services requested?
(Sponsor is responsible for contacting Facilities Planning Services 5 days in advance 425-2254)

Technical Services Requested:
(Sponsor responsible for contacting Media Resources 425-4197)

Specific Setup Requested:
*(Use the space provided for specific setup requests or provide a diagram.
 You will need to confirm setup requests with the University Center 425-4455)*

Sign _____ Date _____

I have read and understand this agreement and I am aware of the Facilities Use Terms and Conditions on the attached page.

UNIVERSITY USE ONLY

Approved _____ Not Approved _____ Referred to Facilities Use Committee _____
 Comments _____

Student Development _____

Parking _____ Security _____

Facilities Management _____ Food Services _____

UTC Action: Rental Amount _____ Contract _____ Insurance _____

Scheduled _____ Date _____ Fees _____ Receipt # _____

Facilities Use Committee Approved _____

Facilities Use Terms and Conditions

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 insurance.