

School of Arts & Culture

Mexican Heritage Plaza

Facility Use Application

Section A

Name of Renter or Organization _____	Today's Date _____
Organization Type	<input type="checkbox"/> Private <input type="checkbox"/> Commercial <input type="checkbox"/> Non-profit (501(c) 3)* <input type="checkbox"/> Other <input type="checkbox"/> Community/Neighborhood Association * Proof of non-profit status required.
Event Contact Address	Home Phone _____
_____	Work Phone _____
_____	Cell Phone _____
Email _____	Fax # _____

Event Title _____	Co-Sponsors _____
Facilities Requested	<input type="checkbox"/> Pavilion <input type="checkbox"/> Plaza <input type="checkbox"/> Garden <input type="checkbox"/> Theater <input type="checkbox"/> Courtyard <input type="checkbox"/> Green Room <input type="checkbox"/> Dressing Room A <input type="checkbox"/> Dressing Room B <input type="checkbox"/> Dressing Room C <input type="checkbox"/> Dressing Room D <input type="checkbox"/> Theater Lobby <input type="checkbox"/> Gallery <input type="checkbox"/> Studio <input type="checkbox"/> Classroom #1 <input type="checkbox"/> Classroom #2 <input type="checkbox"/> Classroom #3 <input type="checkbox"/> Classroom #4 <input type="checkbox"/> Classroom #5 <input type="checkbox"/> Kitchen <input type="checkbox"/> Gravel Lot <input type="checkbox"/> Other: _____
Event Type _____	Estimated Attendance (including staff) _____
Start Date _____	End Date _____
Event Time (s)	Event/Meeting Start Time _____
Move-in time _____	Time the space will be vacated _____
Event end time _____	
Event Description _____	
Attach additional pages if necessary _____	

DECLARATION

As the authorized representative of the applicant, I hereby declare that:

The information contained in this *Facility Rentals Application* and attachment(s) is true, complete and correct to the best of my knowledge.

I hereby release and agree to hold harmless the School of Arts and Culture at MHP, its employees, its agents, and contractors for and from liability and responsibility for any claim, loss or injury connected with the proposed event, except for loss or injury or death caused through the intentional acts or willful misconduct of the School, its employees, agents and contractors.

Signature: _____ Date: _____

Print Name: _____ Date: _____

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Section B

- | | | |
|--------------------------|--------------------------|--|
| YES | NO | |
| <input type="checkbox"/> | <input type="checkbox"/> | Is the event open to the public? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is the event ticketed <input type="checkbox"/> or by invitation <input type="checkbox"/> ? |
| <input type="checkbox"/> | <input type="checkbox"/> | Will there be an admission fee? |
| <input type="checkbox"/> | <input type="checkbox"/> | Admission price per person: \$ |
| <input type="checkbox"/> | <input type="checkbox"/> | Will there be any food prepared, sold or served at the event? Note: Approved caterers required. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Pre-prepared <input type="checkbox"/> Prepared on site |
| <input type="checkbox"/> | <input type="checkbox"/> | Will a caterer be used? Only approved caterers may provide food and beverage. |
| <input type="checkbox"/> | <input type="checkbox"/> | Caterer: _____ Contact Person: _____ Telephone # _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Will there be any non-alcoholic beverages sold or distributed at the event? |
| <input type="checkbox"/> | <input type="checkbox"/> | Describe serving container: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Will there be any alcoholic beverages (beer, wine or spirits), sold or distributed at the event? |
| <input type="checkbox"/> | <input type="checkbox"/> | Describe serving container: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Will a beverage caterer be used? |
| <input type="checkbox"/> | <input type="checkbox"/> | Beverage Caterer name: _____ Telephone # _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Will there be any equipment delivery/unloading for the event? You must be present to receive deliveries. |

Please check equipment and fill in the estimated amounts that you would like to rent. All equipment is rented at a fee that includes setup cost. (Dependent on Availability)

- | | |
|---|---|
| <input type="checkbox"/> Tables – 60" rounds # | <input type="checkbox"/> Platforms/Risers – 8' x 4' section # |
| <input type="checkbox"/> Tables – 8' banquet # | <input type="checkbox"/> Sound System (requires sound operator) # |
| <input type="checkbox"/> Tables – 6' banquet # | <input type="checkbox"/> Podium # |
| <input type="checkbox"/> Tables – 36" rounds # | <input type="checkbox"/> Temporary Power (Plaza only) # |
| <input type="checkbox"/> Chairs - Black # | <input type="checkbox"/> Need WiFi Access? |
| <input type="checkbox"/> Chairs – White Folding # | |

- | | | |
|--------------------------|--------------------------|---|
| Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | Will you be setting up other equipment? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Booths (size/quantity) <input type="checkbox"/> Tents (size/quantity) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Portable restrooms <input type="checkbox"/> Canopy (size/quantity) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Other, explain _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Will there be amplified sound (PA system or other noise generator) at the event? |
| <input type="checkbox"/> | <input type="checkbox"/> | Will there be music at the event? <input type="checkbox"/> Live <input type="checkbox"/> Recorded |
| <input type="checkbox"/> | <input type="checkbox"/> | Will there be open flames related with this event (candles, barbecues, propane fueled equipment) |
| <input type="checkbox"/> | <input type="checkbox"/> | Will there be sales of any kind? |
| <input type="checkbox"/> | <input type="checkbox"/> | Will there be special parking arrangements associated with this event? |
| <input type="checkbox"/> | <input type="checkbox"/> | Describe: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Will there be a street closure associated with this event? |
| <input type="checkbox"/> | <input type="checkbox"/> | Will there be traffic control associated with this event? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you require any IT Services (internet)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Will there be any other activity connected to the event? |
| | | (For example: Live animal display, carnival rides, etc.) Describe activity: _____ |