

OFFICE USE ONLY:

# REQUEST FOR USE OF UNIVERSITY PREMISES AND FACILITIES

OFFICE USE ONLY:

BP # \_\_\_\_\_

## Southern Illinois University - Recreational Sports and Services

EMS # \_\_\_\_\_

Acct. Title \_\_\_\_\_

For Space Requests - return to Assistant Director of Facilities

Contract # \_\_\_\_\_

Mail Code \_\_\_\_\_

300 E. Grand Ave., Carbondale, IL 62901 MC-6717

Date Received # \_\_\_\_\_

Fax to: Amber Armstrong at 618/453-1238

DEPARTMENT/ORGANIZATION \_\_\_\_\_

TYPE OF EVENT \_\_\_\_\_  
(What space will be used for)

EVENT DETAILS \_\_\_\_\_

**PLEASE CHECK ONE OF 5 BOXES BELOW WHICH DESCRIBES YOUR GROUP \***

- Campus Department
- Registered Student Organization (Must first receive funds approval stamp from Student Life if paying from your RSO account.)
- Outside Organization

**List the date and each area you are requesting below:**

Date(s)	Hours		Estimated # of Participants	Space Desired (List areas separately)
	From	To		

**Please Answer the Following:**

- Will there be an admission charge, sale of items, collection of donations or any money generated at this event (excluding dues, assessments or initiation fees)?  Yes  No  
Organizations are required to deposit any such funds into their Organization Fund Account.
- Is this event a fund-raiser for charity?  Yes  No If so, which charity? \_\_\_\_\_
- Will there be any non-SIU-affiliated speakers and/or performers?  Yes  No Name: \_\_\_\_\_
- Are any non-University individuals attending or invited to this event?  Yes  No
- Will food and/or beverage be served?  Yes  No  Breakfast;  Lunch;  Dinner;  Reception;  Coffee;  Other: \_\_\_\_\_
- Will there be a set-up: (Alternations of existing facilities, need for equipment of services)?  Yes  No
- Is insurance required?  Yes  No Note: Insurance will be required for ALL school groups and any activities that involve risk.

**Remarks** (For RSS - Room Arrangement)

**Note: Group is responsible for all cleanup and any damages incurred as a result of this event. \*\***

**THIS REQUEST FOR SPACE WILL BE IN A TENTATIVE STATUS. IT WILL BE CHANGED TO CONFIRMED ONCE YOU RECEIVE A CONFIRMATION FROM THE ASSISTANT DIRECTOR OF FACILITIES.**

I agree that the above organization(s) will abide by the University governing use of University Premises.

Signature of Authorized Organizational Agent (s): \_\_\_\_\_ Date Filed \_\_\_\_\_  
(Name of Department Dean/Director/Head that approves event)

Contact Person \_\_\_\_\_ ID# (if student) \_\_\_\_\_  
(Group representative attending event and responsible for conducting event or activity)

**MUST Complete for Contact Person:**

Local Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_  
Campus Address \_\_\_\_\_ Mail Code \_\_\_\_\_ Phone \_\_\_\_\_  
Email Address \_\_\_\_\_

\* The fiscal officer hereby approves the above mentioned RSO under account number \_\_\_\_\_ to incur the listed charges for the events on the dates and times listed above.

**Fiscal Officer signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Indoor Space:**

<b>MINIMUM CHARGE: (per hour):</b>	<b>On-Campus</b>	<b>Off-Campus</b>
1. Multisport Court 1-7 .....	\$30.00	\$40.00
2. Group Fitness Studio North .....	\$20.00	\$40.00
3. Group Fitness Studio South .....	\$20.00	\$40.00
4. Alumni Conference Room .....	\$15.00	\$40.00
5. Alumni Lounge .....	\$25.00	\$40.00
6. Climbing Wall .....	\$20.00	\$40.00
7. Dance Studio .....	\$20.00	\$40.00
8. Martial Arts Studio .....	\$20.00	\$40.00
9. Natatorium North Diving Well .....	\$25.00	\$40.00
10. Natatorium South Diving Well .....	\$25.00	\$40.00
11. Natatorium West End .....	\$35.00	\$40.00
12. Natatorium East End .....	\$35.00	\$40.00
13. Racquetball Court .....	\$20.00	\$40.00
14. Squash Court .....	\$20.00	\$40.00
15. 200 Meter Track - Lower Level .....	\$33.00	\$40.00
16. Pool Lounge #1 .....	\$20.00	\$40.00
17. Pool Lounge #2 .....	\$20.00	\$40.00

**Outdoor Space:**

<b>MINIMUM CHARGE: (per hour):</b>	<b>On-Campus</b>	<b>Off-Campus</b>
18. Jean Stehr Field .....	\$20.00	\$30.00
19. Campus Lake Becker Pavilion .....	\$25.00	\$35.00
20. Campus Lake Bucky's Haven .....	\$15.00	\$25.00
21. Campus Lake North Pavilion .....	\$15.00	\$25.00
22. Campus Lake South Pavilion .....	\$15.00	\$25.00
23. Rec Sports Outdoor Playfield 1 - F/SP Softball Field .....	\$40.00	\$60.00
24. Rec Sports Outdoor Playfield 2 - F/SP Softball Field .....	\$40.00	\$60.00
25. Rec Sports Outdoor Playfield 3 - SP, SB & Baseball .....	\$40.00	\$60.00
26. Field Rec Sports Outdoor Playfield 4 - Outfields of Fields 1 & 2 .....	\$40.00	\$60.00
27. Upper Arena Field .....	\$40.00	\$60.00
28. Sam Rinella Playfield .....	\$30.00	\$40.00
29. University Tennis Court .....	\$10.00	\$15.00

**Facility Charges:**

<u>Area/Room</u>	<u>Charge/hr</u>	X	<u>Hours</u>	=	<u>Cost</u>
_____	_____	X	_____	=	_____
_____	_____	X	_____	=	_____
_____	_____	X	_____	=	_____
_____	_____	X	_____	=	_____
_____	_____	X	_____	=	_____
Total Facility Charges: _____					

**Entry Fees:**

_____ dep. (under 16) X \$3.00 _____	<b>Post to:</b>
_____ participating adults X \$8.00 _____	(POS 82202)
_____ participating campers X \$5.00 _____	(POS 82102)
Total Entry Fees: _____	

**RSS Personnel Wages:**

<u>Number</u>	X	<u>Rate/hr</u>	X	<u>Hours</u>	=	<u>Cost</u>
_____	X	\$ _____	X	_____	=	_____
_____	X	\$ _____	X	_____	=	_____
_____	X	\$ _____	X	_____	=	_____
_____	X	\$ _____	X	_____	=	_____
Total Wages: _____						

**Amount Due:**

_____ + _____ = _____
Facility & Wage Fees      Entry Fees      Total

Total Facility & Wage Charges: \_\_\_\_\_

Staff Signature: \_\_\_\_\_

**Do Not Write Below This Line (For Office Use Only)**

Date Finalized \_\_\_\_\_

CONTACTED BY \_\_\_\_\_ Date \_\_\_\_\_

EVENT APPROVED BY \_\_\_\_\_ Date \_\_\_\_\_

\* Cancellation Policy: If a reservation is cancelled 7 days or more in advance a full refund will be issued (minus a \$10.00 processing fee).

\*\* Insufficient Funds will result in an additional \$30.00 fee.