

Date:  
Contract #



Application for Facility Use

This is an application for facility use and does not guarantee use of the facility. A Cabrillo College representative will contact you regarding your request and to create a contract. The applicant agrees to provide an insurance policy in the amount of \$1,000,000 naming Cabrillo College as the additionally insured. An application fee of \$20.00 is required with each application.

To request use of the VAPA Crocker Theater or Samper Recital Hall, please visit: <http://cabrillovapa.com/rentals>  
To request use of the Sesnon House, please visit: [www.sesnonhouse.com](http://www.sesnonhouse.com)

Name of Group/Organization: \_\_\_\_\_

Name of Primary Contact: \_\_\_\_\_ Title, as officer of group: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

Facility Request and Event Information:

Note: If you have multiple requests, please attach a separate sheet that lists dates, start and time ends, and requested rooms, if known.

Title of Activity/Event: \_\_\_\_\_ Start date: \_\_\_\_\_ End date: \_\_\_\_\_

Start time: \_\_\_\_\_ am or pm End time: \_\_\_\_\_ am or pm Circle day(s) of week: M T W R F Sa Su

Expected Attendance: \_\_\_\_\_

Requested Facility/Facilities (if known): \_\_\_\_\_

Type of program/use (be specific):

Organization and Event Information:

Is the organization designated as a non-profit 501 (c) 3? Yes : No:

Will fees, donations, or contributions be accepted for this event? Yes : No:

Is there an arrangement with a Cabrillo College division? Yes : No:

I fully understand and agree to the terms and conditions for use of the Cabrillo College property and facilities. I, the undersigned, on behalf of the above named organization certify that we assume full responsibility for any damage to Cabrillo College resulting from the use of facilities are requested above. We agree to abide by the board policies, administrative procedures, and facilities policies and procedures of the Cabrillo College District ([www.cabrillo.edu/associations/governingboard/BoardPolicies.html](http://www.cabrillo.edu/associations/governingboard/BoardPolicies.html)), and to pay the designated fee.

Any application for use of the College school facilities permitted under this policy is subject to the condition that the College expressly reserves the right to revoke permission for use in part of entirety without notice should the College school facilities for which permission has been granted be for conflicting dates and be needed for any College purpose.

Any citizen or organization using College facilities under this policy shall save and hold free and harmless the College cost or expense that may arise during or be caused in any way by such use of the College facilities.

The undersigned states that, to the best of his/her knowledge & under penalty of perjury, the College property for use of which application is hereby made will not knowingly be used for the commission of any illegal act or crime and understands that the usage of these facilities must be open to the general public.

Upon approval, an authorized and original signature is needed to complete the application and contract.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Facility Office Use Only: Approved  Group Rate: Co-sponsorship  Direct Cost Fees:  Fair Rental Value Fee:

Approvals: Extension  Athletic Director:  Director of Maintenance:

Astra  FPPO Track It  IT Track It  Additional Personnel Required

Facilities: \_\_\_\_\_ Date: \_\_\_\_\_

Scott Johnson, Director, Community & Contract Ed

**Organization Name:**  
**Contact Name:**

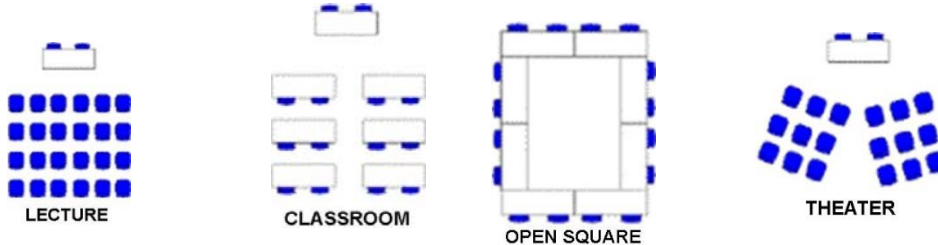
**Date:**  
**Contract Number:**

**Expected Attendance:** \_\_\_\_\_

**Furniture and Room Needs:**

*Only those services and equipment requested below will be provided.*

**Select one of the room configurations below that best suits your needs.**



6 ft tables Quantity: \_\_\_\_\_ No. of chairs: \_\_\_\_\_

Other: \_\_\_\_\_

**If applicable, please indicate request for multiple facilities, the detailed use of each facility including opening/closing time and any furniture or equipment requirements. You may use another page, if needed.**

**Technology Needs: *please select all that apply***

Podium:  Projector:  Screen:  Computer:  Microphone:  Sound System:  DVD player:  WiFi:

Other: \_\_\_\_\_

**Parking Needs:**

**Parking permits cost \$4.00/day per permit and are required 24 hours a day, 7 days a week. Groups may also rent out entire parking lots to alleviate guest purchase of individual parking passes.**

Desired Number of permits: \_\_\_\_\_

Fee for parking permits is due prior to your event. Facilities Coordinator will provide day permits.

Sporting Events:

Special Notes:

Cabrillo College strives to provide the highest level of accessibility to students, visitors and guests. As a renter of our facility, you agree to meet federal standards of accessibility (Title II ADA) in your use of the facility, including access for people with physical and visual disabilities. If you have questions about accommodations, please contact the Accessibility Support Center at (831) 479-6379 at least five days in advance of your event.

**Email completed application to: [extension@cabrillo.edu](mailto:extension@cabrillo.edu) or fax to (831) 477-5239**

**Any questions? Please call Facilities Use and Events Coordinator at (831) 479-6332**

*For Facility Rental Office Use Only:*