College of San Mateo

1700 West Hillsdale Blvd. San Mateo, CA 94402 (650) 574-6161

4200 Farm Hill Blvd. Redwood City, CA 94061 (650) 306-3100

$\bigcirc$
Skyline College
3300 College Dr. San Bruno, CA 94066 (650) 738-4100
$\bigcirc$ Profit $\bigcirc$ Non-Profit - Non-Profit ID/EIN: $\square$
Profit $\bigcirc$
$\square$
Name of Applicant/ Organization: Is this an internal college event? $\bigcirc$ No Yes-If yes, requesting division/department: $\square$

| Authorized Representative: | Office Phone: | Cell Phone: | Fax: |
| :--- | :--- | :--- | :--- |
|  | $\square$ |  | $\square$ |

Day of Event Contact:


Office Phone:
$\square$


Cell Phone:


E-Mail Address: $\square$

## Facility Use/ Event Information

Name/ Nature of Event: $\square$
Event Date(s): $\square$

| Arrival Time: | Event Start Time: | Event End Time: | Departure Time: | Total Hours: |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |

Facility/ Room to Rent: Select One :

Additional Facility/ Room to Rent: Select One :

Additional Facility/ Room to Rent:

## Select One :

Adults (over 18)

| Adults (over 18) |  | Minors (under 18) | Total |
| :--- | :---: | :---: | :---: |
| Estimated Attendance : |  |  | 0 |
| Spectators : |  |  | 0 |
| Total Attendance : | 0 | 0 | 0 |

Note: If you are requesting to reserve the Theater, you must complete the Theater Facilities Request Addendum found at the end of this application.

Check the box if you are:
Collecting admission or sales - For what purpose are the funds used?


Media Equipment - Check the box and enter amount required.


Furniture - Check the box and enter amount required.


Special Arrangements:

The applicant understands and agrees this application is not a confirmation of facility use and that the date(s) for the event will not be confirmed until the application has been reviewed and approved by College. Upon approval by College, the applicant will be required to sign the District's Facilities Use Agreement to finalize the application. This application is not valid unless a Facilities Use Agreement, signed by both the Permittee and the District, is attached. Total estimated fees are based on information provided by the applicant. Applicant is responsible for actual fees incurred. Any additional fees will be invoiced and will be due upon receipt.
Applicant Signature: $\square$
Date: $\qquad$

## San Mateo County Community College District <br> Request for Use of Facilities

## For SMCCCD Use Only

Account Number (FOAP):

1. $\qquad$
2. $\qquad$
3. 

Facilities Assigned:

1. $\qquad$

Personnel Requirement (All staff charges will be at a two hour minimum):

| Type | \# of <br> Staff | Estimated <br> Fees | Type | \# of <br> Staff | Estimated <br> Fees | Type | \# of <br> Staff | Estimated <br> Fees |
| :--- | :---: | :---: | :--- | :---: | :---: | :--- | :--- | :---: | :---: |
| Security |  |  | Technician |  |  | Grounds |  |  |
| Custodial |  |  | Special Tech. |  |  | Other: |  |  |

Total Estimated Fees:

| Application | Facilities Rental | Personnel | Equipment | Other | Total Est. Fees |
| :--- | :--- | :--- | :--- | :--- | :--- |
|  |  | $\$ 0.00$ |  |  | $\$ 0.00$ |

College Supervisor Signature: $\square$
Date: $\qquad$
V.P. of Instruction/ V.P. of Student Services Signature: $\square$

Date: $\square$
V.P. of Administrative Services Signature: $\square$
Date: $\qquad$

Theatre Facilities Rental Request Addendum

Event Type:
Expected number in attendance: For rehearsals $\square$ For performances $\square$

List Event Date(s): If your event exceeds 3 days, use the additional sheet at end to complete.


INDICATE THE THEATRE SPACE THAT YOU WILL USE (CHECK ONE): $\square$ FULL STAGE $\square$ FRONT OF MAIN CURTAIN ONLY

Additional Spaces Required (please check all that apply):


TECHNICAL REQUIREMENTS NEEDED (Please check all that apply):

| Stage | Lighting | Sound | Audio Visual |
| :---: | :---: | :---: | :---: |
| $\square$ Main Curtain | Basic House Plot-Includes areas and some specials | Microphones <br> How many? | $\square$ DVD Projection |
| $\square$ Black Masking | $\square$ Additional specials | $\square$ CD Playback | VHS Projection |
| $\square$ Cyc | $\square$ Additional Color | $\square$ MD Playback | $\square$ Computer Projection |
| $\square 1 / 2$ StageTraveller | $\square$ Special focusing | $\square$ Cass Playback | $\square$ Video feed |
| Fly system (drops etc.) | $\square$ Spotlight | Monitor speakers |  |
| $\square$ Scenery on stage | $\square$ Patterns | $\square$ Audio feed |  |
| $\square$ Podium |  | Backstage monitors |  |
| Portable risers (3'X8') How many? | Other |  |  |
| ChairsHow many? |  |  |  |
| Tables (30"X6') How many? |  |  |  |
| Acoustical Shells |  |  |  |
| $\square$ Music Stands |  |  |  |

## Use this page if you have more than three dates.



