

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

### **Canada College**

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

## College of San Mateo 1700 West Hillsdale Blvd.

San Mateo, CA 94402 (650) 574-6161

## Skyline College 3300 College Dr.

San Bruno, CA 94066 (650) 738-4100 **District Office** 3401 CSM Dr. San Mateo, CA 94402 (650) 574-6550

### **Applicant Information** Application Date: Profit Non-Profit - Non-Profit ID/EIN: Name of Applicant/ Organization: Is this an internal college event? Yes – If yes, requesting division/ department: No Authorized Representative: Office Phone: Cell Phone: Fax: Day of Event Contact: Office Phone: Cell Phone: Street Address: City: State: Zip: E-Mail Address: Facility Use/ Event Information Name/ Nature of Event: Event Date(s): Arrival Time: **Event Start Time: Event End Time: Departure Time: Total Hours:** Note: If you are requesting to reserve the Theater, you must Facility/ Room to Rent: complete the Theater Facilities Request Addendum found at the end of this application. Additional Facility/ Room to Rent: Additional Facility/ Room to Rent: Minors (under 18) Adults (over 18) Total Estimated Attendance: Spectators: Total Attendance:

Applicant Signature:

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Check the box if you are:	
Collecting admission or sales – For what purpose are the fun	ds used?
Serving food – Please describe:	
Providing concessions – Please describe:	
Serving alcohol	Having minors in attendance
Needing parking information	Multi-day event
Having live music	
Media Equipment - Check the box and enter amount required.	
DVD player	Projector
MP3 connector	Projection screen
Sound system	Monitor/TV
Microphone	Other:
Furniture – Check the box and enter amount required.	
Chair	6 foot table
Podium/ Lectern	8 foot table
Stage	Other:
Round table	
Special Arrangements:	
The applicant understands and agrees this application is not a consevent will not be confirmed until the application has been review the applicant will be required to sign the District's Facilities Use Agreement, signed by both the P fees are based on information provided by the applicant. Applications will be invoiced and will be due upon receipt.	red and approved by College. Upon approval by College, Agreement to finalize the application. This application is ermittee and the District, is attached. Total estimated

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Date:

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Date:

For SMCCCD Account Numb											
1.											
2.											
3.											
Facilities Assign	ned:										
1.											
2.											
3.											
4.											
5.											
Personnel Req	uirem	ent (All staff c	harge	es will be at a t	wo hou	ur minimum)	:				
Type	# of Staf			Type	# of	Estimated	Type		# of	Estimate	
Security	Star	f Fees	Tac	hnician	Staff	Fees	Grounds		Staff	Fees	
Custodial			_	cial Tech.			Other:				
	I		-		l .					<u> </u>	
Taral Fall and a											
Total Estimate  Application		s: Facilities Renta	ıl İ	Personnel		Equipment		Other		Total Est.	. Fees
- quiperson or o											
College Supervisor Signature:						Date:					
V.P. of Instruction/ V.P. of Student Services Signature:				:				Date:			

V.P. of Administrative Services Signature:



### **Theatre Facilities Rental Request Addendum**

**Event Type:** 

Expected number in attendance: For rehearsals For performances

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

Date 1: Set-up Rehearsal Performance/Event

Arrival Time: A.M. P.M. Time Event Begins: A.M. P.M.

Time Event Ends: A.M. P.M. Time of Departure: A.M. P.M.

**Total Hours:** 

Date 2: Set-up Rehearsal Performance/Event

Arrival Time: A.M. P.M. Time Event Begins: A.M. P.M.

Time Event Ends: A.M. P.M. Time of Departure: A.M. P.M.

**Total Hours:** 

Date 3: Set-up Rehearsal Performance/Event

Arrival Time: A.M. P.M. Time Event Begins: A.M. P.M.

Time Event Ends: A.M. P.M. Time of Departure: A.M. P.M.

**Total Hours:** 

INDICATE THE THEATRE SPACE THAT YOU WILL USE (CHECK ONE):

FULL STAGE FRONT OF MAIN CURTAIN ONLY

Additional Spaces Required (please check all that apply):

Foyer/Lobby- For use other than basic lobby – ie. Refreshments, merchandising, separate event

Box Office – For selling tickets

Room 142 - classroom with moveable tables and chairs - capacity 60

Room 148 - classroom with tiered, fixed tables and chairs - capacity 73

Room 104 - classroom with moveable tables and chairs - capacity 30

Room 117 - classroom with moveable tables and chairs - capacity 30

Other

TECHNICAL REQUIREMENTS NEEDED (Please check all that apply):

Stage	Lighting	Sound	Audio Visual
Main Curtain	Basic House Plot Includes areas and	Microphones	DVD Projection
	some specials	How many?	
Black Masking	Additional specials	CD Playback	VHS Projection
Сус	Additional Color	MD Playback	Computer Projection
½ StageTraveller	Special focusing	Cass Playback	Video feed
Fly system (drops etc.)	Spotlight	Monitor speakers	
Scenery on stage	Patterns	Audio feed	
Podium		Backstage monitors	
Portable risers (3'X8') How many?	Other		
Chairs-			
How many?			
Tables (30"X6') How			
many? `			
Acoustical Shells			
Music Stands			

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

Date 4:	Set-up	Rehearsal	Performance/Event		
Arrival Time:	A.M. P.M.	Time Event Begi	ns:	A.M.	P.M.
Time Event Ends:	A.M. P.M	. Time of Depar	ture:	A.M.	P.M.
Total Hours:					
Date 5:	Set-up	Rehearsal	Performance/Event		
Arrival Time:	A.M. P.M.	Time Event Begi	ns:	A.M.	P.M.
Time Event Ends:	A.M. P.M	. Time of Depar	ture:	A.M.	P.M.
Total Hours:					
Date 6:	Set-up	Rehearsal	Performance/Event		
Arrival Time:	A.M. P.M.	Time Event Begir	ns:	A.M.	P.M.
Time Event Ends:	A.M. P.M.	. Time of Depar	ture:	A.M.	P.M.
Total Hours:					
Date 7:	Set-up	Rehearsal	Performance/Event		
Arrival Time:	A.M. P.M.	Time Event Begi	ns:	A.M.	P.M.
Time Event Ends:	A NA - D NA				P.M.
Timo Evont Endo.	A.M. P.M	. Time of Depar	ture:	A.M.	
Total Hours:	A.M. P.M	. Time of Depar	ture:	A.M.	
	Set-up	. Time of Depar	ture: Performance/Event		
Total Hours:		·	Performance/Event		P.M.
Total Hours:  Date 8:	<b>Set-up</b> A.M. P.M.	Rehearsal	<b>Performance/Event</b> ns:		P.M.
Total Hours:  Date 8:  Arrival Time:	<b>Set-up</b> A.M. P.M.	Rehearsal Time Event Begi	<b>Performance/Event</b> ns:	A.M.	P.M.
Total Hours:  Date 8:  Arrival Time:  Time Event Ends:	<b>Set-up</b> A.M. P.M.	Rehearsal Time Event Begi	<b>Performance/Event</b> ns:	A.M.	P.M.
Total Hours:  Date 8:  Arrival Time:  Time Event Ends:  Total Hours:	<b>Set-up</b> A.M. P.M. A.M. P.M	Rehearsal Time Event Begii . Time of Depar	Performance/Event ns: ture: Performance/Event	A.M.	P.M.
Total Hours:  Date 8: Arrival Time: Time Event Ends: Total Hours:  Date 9:	Set-up A.M. P.M. A.M. P.M	Rehearsal  Time Event Begin  Time of Depare  Rehearsal  Time Event Begin	Performance/Event ns: ture: Performance/Event ns:	A.M. A.M.	P.M. P.M.