

2.

| Conchine of | | | | OA 302 11-333 | ,0 | |
|---------------|------------|--------|---------------|---------------|----|---------------------|
| FACILITIES CO | ORDINATION | PHONE: | (310) 900-160 | 00 Ext. 2973 | • | FAX: (310) 900-1691 |

| OFFICE USE ONLY | | | | | |
|-----------------|--|--|--|--|--|
| CONTRACT NO.: | | | | | |
| FY: | | | | | |
| | | | | | |

FACILITY USE APPLICATION

1. APPLICANT INFORMATION

| Α. | | | B. Organization T | vne (Chec | k ()ne) |
|----|--|---------------------|-------------------|------------------|---------------------------|
| | Organization Name | | Private | Jpc (enco | |
| | | | Public Age | ncy | |
| | Street Address | Number | | Federal ID | |
| | | | Compton C | ollege (In-Ho | ouse / Official Business) |
| | City State | Zip Code | | | |
| C. | Event Sponsor (Responsible Party) | D. | Contact Person (/ | f different fi | rom Event Sponsor.) |
| | | | | | |
| | First Name Last Name | | First Name | | Last Name |
| | () - () - | | () - | (| () - |
| | Daytime Phone Ext. Evening/Cell Phone | 2 | Daytime Phone | Ext. | Evening/Cell Phone |
| | () - | | () - | | |
| | Fax Email | | Fax | Email | |
| | Is event co-sponsored (providing assistance |) with another age | ency or commercia | l organiza | tion? Yes No |
| | If yes, identify. | , . | - | C | |
| | · · · · | | | | |
| | ENT DETAILS | | | | |
| Α. | | | | | |
| | Event Name | | | | |
| В. | | | | | |
| | Purpose | | | | |
| C. | Date(s): From: To: | Hou | rs: | AM PM | AM PM |
| | MM/DD/YY MM | /DD/YY | Begin | | |
| | Set-up time / clean-up time, if ne | eeded: Hou | rs: | AM | AM |
| | | | Set-Up | PM | Clean-Up |
| D. | Open to public? | ily Attendance Est | | , | Sieali-Op |
| D. | | | | | |
| E. | Will admission fees, donations, collections, s | solicitations or ma | Spectato | | Participants ? |
| ∟. | If yes, how will net receipts be used? | | | conected | |
| | | | | | |
| F. | Are refreshments / food to be served or sold | ? 🗌 Yes 🗌 | No | | |
| | If yes, describe. | | | | |

Organization Name

| | Athletic Field | Dance Room (Gym) |] | Student Center |
|--|--------------------------|------------------------|---|--------------------------------|
| | Athletic Field, Track | Gymnasium |] | Student Lounge Outdoor Quad |
| | Atrium, VT | Little Theater * | | Swimming Pool * |
| | Board Room | Locker Room: 🔲 M 🗌 F | | |
| | Classroom(s) Qty: | Parking Lot(s) |] | |
| | Classroom, Smart | Stadium w/ Concession | | |
| | Conference Room, Title V | Stadium w/o Concession | | |
| | Conference Room, VT | Staff Lounge | 1 | |

| None | | | | | | |
|---|-----------------------|----------------|-------|---------------------|----------------------|--------------------|
| Applicant will provide Sr | | | ll Ta | ble Small Canopy | | |
| Request College To Provide (Mark all that apply.) | | | | | | |
| QTY | ITEM QTY ITEM | | Ітем | OTHER | | |
| | Chairs | | | Television with DVD | | |
| | Tables, 6' | | | Television with VCR | | |
| | Tables, 8' | | | Projector, Data | | |
| | Podium / Lectern | | | Projector, Overhead | | |
| | Stool | | | Projector, Slide | Spe | ecialized Services |
| | Microphone | Gymnasium Only | | | Electrical (Outdoor) | |
| | Public Address System | | | Backdrops | | Lights (Outdoor) |
| | Stage / Platform | | | Bleachers | | Internet Access |
| | Screen | | | Scoreboard | | |

5. APPLICATION CONDITIONS / SIGNATURE

- A. The Facility Use Application is an application only and in no way constitutes any obligation by the District to the Applicant for use of any facility. Authorization to use a facility is not given until the Applicant has receives a signed Civic Center Permit or Lease Agreement.
- B. Documentation supporting the nature and purpose of the organization and event must be submitted to the College on request. Failure to do so may result in disqualification of the Application.
- C. The undersigned has read and hereby agrees to abide by and enforce all rules and regulations, including insurance requirements, pertaining to the use of school facilities established by the Board of Trustees of Compton Community College District which are <u>attached</u> to this application.

| Event Sponsor Signature (Applicant) | OFFICE USE ONLY |
|-------------------------------------|--|
| | Application Approved: 🗌 Yes 🗌 No |
| | Date: |
| Date | Permit/Agreement Amount: \$ |
| Date | Authorized Representative of Board of Trustees |