



CEW # \_\_\_\_\_

### FACILITY RENTAL REQUEST FORM

**Please complete this form in its entirety. All requests are processed on a first-come, first-serve basis. All events are subject to approval, and all activities must adhere to all College rules and regulations.**

Name of Organization: \_\_\_\_\_

Person Responsible for Event/Meeting: \_\_\_\_\_

Name of Event/Meeting: \_\_\_\_\_

Nature of Event/Meeting: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Tax Exempt # \_\_\_\_\_ *(If Tax Exempt, Attach Certificate)*

Building Requested: \_\_\_\_\_ Room Requested: \_\_\_\_\_

Event Date: \_\_\_\_\_ Event Time: \_\_\_\_\_

Set-Up Date \_\_\_\_\_ Set-Up Time \_\_\_\_\_

Estimated # of Participants: \_\_\_\_\_ Participant's Fee \$ \_\_\_\_\_

Estimated # of Spectators \_\_\_\_\_ Spectator's Fee \$ \_\_\_\_\_

**Please indicate below what is needed for the event.**

Security # requested \_\_\_\_\_

Maintenance

Special Needs

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Equipment (Please estimate # needed.)

\_\_\_ rectangular tables \_\_\_ round tables \_\_\_ chairs \_\_\_ skirting

**Facilities Use Forms Must be Completed and Returned within Ten (10) Days**

cc: VP of Admin. & Finance / Security / Bursar's Office / Audio Visual Department / Maintenance / Custodial

**Please draw a sketch of how the event is to be set up, be as detailed as possible:**

**Please describe the activities that will take place:**

---

---

---

**Mail, e-mail or fax completed form to:**

Clinton Community College  
Attn: Robert Trombley  
136 Clinton Point Drive  
Plattsburgh, NY 12901

robert.trombley@clinton.edu

Fax: (518) 562-4219

Normal Office Hours: Monday through Friday 6:00 a.m. through 3:00 p.m.

**OFFICE USE ONLY**

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

Facility Use Approved (*Signature*) \_\_\_\_\_

Insurance Coverage Approved (*Signature*) \_\_\_\_\_

Rental Fee Co-Sponsored (*President's Signature*) \_\_\_\_\_

Fee \$ \_\_\_\_\_