



Campus Administration

Facilities Reservation Request Form

(305) 237-1141 (main)

(305) 237-8031 (fax)

northreservations@mdc.edu (email)

Visit Us @

www.mdc.edu/main/facilities_rental



This form should be submitted immediately to the office of Campus Administration by fax or email. The organization sponsoring the event is financially responsible for all program expenses and overtime. This form is for room reservations only.

ALL INFORMATION ON THIS FORM IS REQUIRED

Date Submitted:	Contact Name:	Phone:
Fax:	E-mail:	Depart. Room Number/Campus: North
Name of department/company/organization hosting event:		

Title/Name of Event:

Description of Room Setup Required:

Approximate Number of People attending:

MDC employees attending event?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Community members attending event?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
MDC students attending event?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Serving Refreshments and/or food?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
M-DCPS employees attending event?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Will there be an admission fee?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
M-DCPS students attending event?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Admission Charge (if any):	Yes <input type="checkbox"/>	No <input type="checkbox"/>
External Community/Corporate Leaders Attending Event?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Media Services personnel required?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Please Attach Attendee List to this Form.

UNDER NO CIRCUMSTANCES IS FOOD AND DRINKS ALLOWED INSIDE OF THE LEHMAN THEATER, GREEN ROOM AND A104. ANYONE IN VIOLATION OF THIS RULE WILL BE FINED A CLEANING FEE FOR ANY SPILLS.

Space(s) being requested: *(Rooms with a * have a minimum capacity of 100. Check our website for capacity)*

Science Complex:	<input type="checkbox"/> A104*	<input type="checkbox"/> Science Plaza	<input type="checkbox"/> Tiki Hut
Building 4000:	<input type="checkbox"/> MJ Taylor	<input type="checkbox"/> 4207-1	<input type="checkbox"/> Quiet Dining Room <input type="checkbox"/> 4000 Atrium
Building 3000:	<input type="checkbox"/> 3249- Hall A	<input type="checkbox"/> 3249- Hall B	<input type="checkbox"/> 3249- Hall C <input type="checkbox"/> 3249- Hall D
	<input type="checkbox"/> 3201 <input type="checkbox"/> 3202	<input type="checkbox"/> 3238	<input type="checkbox"/> 3239 <input type="checkbox"/> 3000 Atrium
Building 2000:	<input type="checkbox"/> 2151	<input type="checkbox"/> 2000 Atrium	<input type="checkbox"/> 7000 Atrium
Theaters:	<input type="checkbox"/> Lehman Theater*	<input type="checkbox"/> Studio Theater	<input type="checkbox"/> 5000 Atrium <input type="checkbox"/> 5000 Lakeside
<input type="checkbox"/> Other (please list) _____			

Event Date(s):	Event Starting time:	Event Finishing Time:
Setup Starting Date:	(A standard 1 day prior to event is required for setup)	

IF APPLICABLE (theaters only):

Rehearsal Date(s):	Starting time:	Finishing Time:
Technical Rehearsal Date(s):	Starting time:	Finishing Time:
Dress Rehearsal Date(s):	Starting time:	Finishing Time:

INTERNAL USER: You are responsible for sending work request to AV/Media Services, Campus Services (setup/custodial), Public Safety and Chartwells (2) weeks prior, and notifying them of cancellations

PLEASE LEAVE THE FACILITY IN THE SAME CONDITION YOU FOUND IT IN. REMOVAL OF CHAIRS AND RE-ARRANGING OF FURNITURE IS NOT PERMITTED WITHOUT A WORK ORDER.

YOUR RESERVATION IS NOT CONFIRMED UNTIL YOU RECEIVE AN APPROVAL RECEIPT

TO BE FILLED OUT BY ADMINISTRATIVE SERVICES OFFICE ONLY:

Rooms checked for availability (sign): _____

Approved: Yes No

Fermin Vazquez, Senior Director