

North Campus **Kendall Campus** **Wolfson Campus** **Medical Center Campus** **Homestead Campus** **InterAmerican** **Hialeah Center Campus** **West Campus**
11380 NW 27th Ave 11011 SW 104 Street 300 NE 2nd Ave 950 NW 20th Street 500 College Terrace 627 SW 27 Ave 1780 W 49th Street 3800 NW 115 Ave
Miami, FL 33167 Miami, FL 33176 Miami, FL 33132 Miami, FL 33127 Homestead, FL 33030 Miami, FL 33135 Hialeah, FL 33012 Doral, FL 33178

REQUEST FOR USE OF MIAMI DADE COLLEGE FACILITIES

1. The attached request form must be submitted at least four weeks prior to the event unless authorized by Campus President or designee. The following information should be included:
 - A. Name of the person or organization seeking to use the College's facilities.
 - B. Name, title, email, and phone number of the USER's contact person.
 - C. USER's status as an individual, for-profit, non-profit, or governmental/public entity.
 - D. Name of the event.
 - E. College Facility requested, if known.
 - F. Nature of the activity (what is the purpose /topic/reason for the activity).
 - G. Date and time of the activity (include the activity's start/end times and alternate date).
 - H. Admission charge (will there be an admission charge or workshop fee?).
 - I. Whether any sales will be involved, including food or alcohol sales.
 - J. Approximate number of people attending/participating.
 - K. Special set-ups (please include a diagram and indicate number and location of chairs, tables, podium and audiovisual equipment).
 - L. Specify special equipment, furniture or services requested (i.e. microphones, podiums, televisions, easels, chairs, tables, A/V services, custodial, security, food service, videotaping, flags, etc.).
2. Proof of insurance - A Certificate of Insurance meeting the requirements set for the MDC Procedure 3908, and as may be otherwise required by the College, must be received by the College no later than three (3) days before the beginning of the event.
3. If serving or selling alcohol, USER must obtain the required licenses and include host liquor liability liquor and/or liability coverage with the insurance required above.

MIAMI DADE COLLEGE'S RESPONSE

Once the request form is received, a proposal, including cost, will be processed and forwarded to the requestor for approval. Once an approval is received, the request will be submitted for appropriate approval. If the request is approved, a standard "Agreement for Temporary Use of Miami Dade College Facilities" contract form and invoice will be provided.

THE REQUESTOR will return to the designated College Office, the signed contract, the signed invoice, a Certificate of Insurance and a check made payable to Miami Dade College. Final payment must be received prior to date of USER's event, unless prior approval is authorized by the College in advance.

REMINDERS

- You are responsible and liable for all furniture and equipment damaged or stolen, and for any damage or defacement of the facility.
- Do not tape anything on the walls, doorframes, furniture, drapes, etc.
- Food and beverages are not allowed in our facilities, except in the cafeteria. (Please contact campus for exceptions in their respective areas.)
- Use only DRY-ERASE MARKERS on the white marking boards.
- Carefully review MDC Procedure 3908 and the Agreement for Temporary Use of Miami Dade College Facilities which fully outline the College's rules, regulations, and terms and conditions.

EXCLUSIONS

Miami Dade College reserves the right to deny any requests.

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InterAmerican
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Miami, FL 33135

Hialeah Center Campus
1780 W 49th Street
Hialeah, FL 33012

West Campus
3800 NW 115 Ave
Doral, FL 33178

REQUEST FORM

Today's Date:

Company/Organization's Name:

Profit Non-Profit Government Educational

Requestor's Name:

Title:

Email address:

Phone Number:

Alternate Contact Person:

Title:

Email address:

Phone Number:

Name of Event:

Number of attendees expected:

Purpose for request:

Set-Up Request (Please see attached diagram and indicate set-up details):

Audiovisual Equipment:

Venue(s) that are being requested:

Date(s)	Day(s)	Time(s)	Set-up time(s)

List of guest speakers, dignitaries, elected officials and/or celebrities

Are MDC employees expected to attend this event?

Yes No

Are MDC students expected to attend this event?

Yes No

Are MDCPS students expected to attend this event?

Yes No

Will community members be attending this event?

Yes No

Will there be an admission fee for this event, if yes \$ _____? Yes No

Will refreshments and or food be served? Yes No

Will alcohol be served? Yes No

Will MDC be partnering with another organization, if so, which one(s)?

Submit Request to: Campus Administration Office or designated department

Campus Administration

11380 N.W. 27 Avenue

Miami, FL 33167

Room 1315

Phone: (305) 237-1141

Email form to:

Jesenia Patino

Phone: (305) 237-1724

Email: jpatino1@mdc.edu

Internal Use Only

Approved Denied

Campus Director of Administration: _____ Date: _____