



FACILITY USAGE APPLICATION

Applicants submit completed application to the designated campus contact listed in Attachment A.

INSTITUTION APPROVAL IS CONTINGENT ON THE APPLICANT'S SUCCESSFUL COMPLETION OF ALL FINANCIAL AND/OR INSURANCE OBLIGATIONS AS MAY BE REQUIRED BY THE INSTITUTION.

Please type or print:

Name of Organization/Individual: _____ Contact Person: _____
Mailing Address: _____ Phone Number: _____
City: _____ State: _____ Zip: _____ Email Address: _____

Is the billing address the same as above? If not, please indicate where invoices should be sent:

Name: _____ Phone: _____ Email Address: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____

Please fill in completely:

Non-Profit Organization (Proof required) For-Profit Business or Organization Governmental Agency Other: _____

Location Requested: O'Brien Theatre Princess Theatre Expo Center Other Location Building & room number (if known): _____

Number of people expected: _____ **Admission/registration fee?** No Yes: Amount: \$ _____
(Accommodation cannot be guaranteed for a larger number than anticipated)

Date(s) Requested: _____ **Time Requested (from/to):** (daily beginning & ending times) _____ **Date and Time of Performance/s:** (if applicable) _____

Detailed Description of Activity (indicate name and general topic if a speaker): _____

Note: Any affiliated entity or affiliated individual or non-affiliated entity or individual wishing to assemble, demonstrate, distribute literature or engage in similar public activity on one of the Roane State campuses must complete the request (application) at least five business days in advance of the desired date of the activity. The Vice President for Business and Finance or designee will review the requests that relate to or will take place on the Roane County Campus. The appropriate Site Director will review the request for the other Roane State higher education centers. Approval or denial of the request will be in writing and may take the form of an email message. Disapproval of the request to use the designated areas will include a statement regarding the basis for the disapproval. RSCC GA-06-01 governs such activities and designates areas on each campus where such activities may occur.

**** Copies of marketing materials need to be provided to the designated campus contact prior to advertising the event! ****

Please list any special needs below:

- Food Service:** Harriman Campus and Oak Ridge Branch Campus events must use College food service vendor.
- Room Setup** (Check all that apply): **Tables:** How many? _____ / **Chairs:** How many? _____ / **Podium:** / **Other:** _____
- Audio/Visual:** Arrangements will be made through the Audio Visual Services. Contact information will be given when reservation is confirmed.
- Safety and Security (describe special needs):** _____

OTHER: _____

FOR INSTITUTION USE ONLY:

APPROVED DENIED

Date: _____
Comments: _____

By: _____

Charges:
Facility: _____
Custodial: _____
Security: _____
Technician: _____
Equipment: _____
Utilities: _____

Total Charges: \$ _____
Deposit Due: \$ _____
Balance after Dep.: \$ _____
Date Dep. Paid: \$ _____
Payments Made on Account:
Date: _____ Amount: \$ _____

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APPLICANT CERTIFICATIONS AND AGREEMENT TO TERMS OF USE:

(Please read carefully and sign. Application will not be considered if this section is not completed.)

On behalf of the applicant, I acknowledge by signing below that the Institution has made a copy of GA-06-01 and GA-06-02 available for review. Applicant understands that submittal of this application shall constitute agreement by applicant to the following conditions, in addition to the conditions described in those policies:

- 1) The intended use of the Institution property and facilities by applicant does not violate, and actual use will not violate, the provisions of the Tennessee Board of Regents Policy on Use of Campus Property and Facilities or any policies or regulations of the Institution, or any federal, state, or local law or regulation.
- 2) Any use of college property and facilities pursuant to this application that is contrary to such policies, laws, or regulations or that is inconsistent with the activity as described in this application constitutes grounds for the institution to remove the activity from college property.
- 3) Applicant agrees to indemnify the institution and hold it harmless from liabilities arising out of applicant's use of institution property and/or facilities, including but not limited to personal injury, property damage, court costs or attorney fees.

I hereby acknowledge that I have read the Applicant Certifications and referenced policies, and agree to abide by these requirements.

Name of Applicant

By: _____ Date: _____

Please mail or fax the completed form to the designated campus contact as indicated in Attachment A.

Reservations for use of facilities are confirmed when the applicant receives *official* notification from Roane State Community College authorizing the request. Due to the high demand for rooms, we will not confirm, pencil-in, or otherwise reserve space for non-affiliated groups by phone or verbal agreement. If there is any question as to the approval of your application, or if confirmation has not yet been received, please contact the designated campus contact in Attachment A.

FACILITY USAGE CAMPUS CONTACTS	
<p>Roane County Campus (Harriman excluding Princess Theatre and O'Brien Theatre) Jeremiah Johnson Email: Johnsonjt1@roanestate.edu Phone: 865-882-4590 Fax: 865-882-4521 Address: 276 Patton Lane; Harriman, TN 37748</p>	<p>Princess Theatre & O'Brien Theatre (Harriman) Courtney Minton Email: mintoncl1@roanestate.edu Phone: 865-354-3000 ext. 4856 Fax: 865-285-3305 Address: 276 Patton Lane; Harriman, TN 37748</p>
<p>Anderson County Campus (Oak Ridge) Sandy Vann Email: vannsl@roanestate.edu Phone: 865-481-2000 ext. 4802 or 2301 Fax: 865-481-2018 Address: 701 Briarcliff Avenue; Oak Ridge, TN 37830</p>	<p>Knox County Campus – Center for Health Sciences (Knoxville) Kirk Harris Email: harrisk@roanestate.edu Phone: 865-539-6904 Fax: 865-539-6907 Address: 132 Hayfield Road; Knoxville, TN 37922</p>
<p>Campbell County Campus (LaFollette) Sharon Wilson Email: wilsonsw@roanestate.edu Phone: 423-562-7021 Fax: 423-562-7022 Address: 201 Independence Lane; LaFollette, TN 37766</p>	<p>Loudon County Campus (Lenoir City) Susan Williams Email: williamssm@roanestate.edu Phone: 865-986-1525 Fax: 865-988-8878 Address: 100 West Broadway, Suite 131; Lenoir City, TN 37771</p>
<p>Cumberland County Campus (Crossville) Dewayne McGhee Email: mcgheefd@roanestate.edu Phone: 931-456-9880 Fax: 931-456-1933 Address: 2567 Cook Road; Crossville, TN 38571</p>	<p>Morgan County Campus (Wartburg) Melody Kees Email: keysms@roanestate.edu Phone: 423-346-8700 Fax: 423-346-2168 Address: 150 Longview Drive; Wartburg, TN 37887</p>
<p>Fentress County Campus (Jamestown) Cheryl Tays Email: taysca@roanestate.edu Phone: 931-752-8320 Fax: 931-752-8319 Address: 632 N. Main Street; Jamestown, TN 38556</p>	<p>Scott County Campus (Huntsville) Skip Jones Email: jonesfd1@roanestate.edu Phone: 423-663-3878 Fax: 423-663-3877 Address: 410 W. H. Swain Boulevard; Huntsville, TN 37756</p>