

# STUDENT ASSOCIATION DIPPIKILL

## OUTSIDE GROUP REQUEST FORM INSTRUCTIONS

Definition of an “outside group”: Any group NOT made up of at least 50 percent SUNYA affiliates (students, alumni, faculty/staff, or immediate family).

### Rules:

- 1) Only exclusive whole building reservations will be taken.
- 2) Nights, other than Friday & Saturday, and holidays, will be considered.
- 3) Friday & Saturday nights, and holidays, will be considered only after SUNYA affiliates have had adequate opportunity to reserve the facilities first.
- 4) Groups must have their own insurance.
- 5) Groups must have an approved staff to client ratio, not to be less than 1:6.
- 6) Groups must pay in full at the time the reservation is made.

**Filling out an outside group request form is not considered a reservation.**

### Procedures:

- 1) Fill out an Outside Group Use request form (attached), and return to the Director of Operations, Student Association, Campus Center 116
- 2) The request will be given to the Camp Dippikill Governing Board for approval. Each reservation will require a form; however, subsequent approval may be obtained through a phone call to the Dippikill directors by the Student Association Administrative Assistant. If there was no previous problem, it may be approved on the spot.
- 3) After approval is granted, a regular Dippikill reservation must be performed complete with payment. Your group then has a confirmed reservation. Reservations may be made up to three months in advance, however, there are no refunds or changes once a reservation is made.
- 4) Descriptions of each facility and prices are on the regular reservation brochure. If you have any other questions, please call Dennie Swan, Guest Services Manager at Dippikill at (518) 623-9917.

## DIPPIKILL OUTSIDE GROUP REQUEST FORM

1. Name of Group \_\_\_\_\_  
Address of Group \_\_\_\_\_  
Phone # \_\_\_\_\_
2. Description/Explanation of Group: \_\_\_\_\_
3. List names of staff people attending: \_\_\_\_\_
4. Number of clients attending: \_\_\_\_\_. Age range \_\_\_\_\_.
5. Do any of the people in your group have any disabling conditions that we might need to be aware of? \_\_\_\_\_
6. Would not being able to drive right up to the building(s) present any problems? \_\_\_\_\_
7. Would you anticipate any problems if University at Albany Students were using Dippikill at the same time?  
If so, please specify: \_\_\_\_\_
8. Does your group have its own health \_\_\_\_, accident \_\_\_\_, and liability \_\_\_\_ insurance? \_\_\_\_\_
9. Who is to be contacted in case of damage to Dippikill or other problems?  
Name and title \_\_\_\_\_  
Address \_\_\_\_\_  
Phone # \_\_\_\_\_
10. Building Request    1<sup>st</sup> choice \_\_\_\_\_    2<sup>nd</sup> choice \_\_\_\_\_  
Date (s)                      1<sup>st</sup> choice \_\_\_\_\_    2<sup>nd</sup> choice \_\_\_\_\_
11. What time do you expect to arrive? (Check-in after 1pm) \_\_\_\_\_
12. All regular rules and regulations of Dippikill use apply to your group. Be sure to obtain and read the regular reservation and information sheet, as well as the Outside Group Use sheet (attached).

Signature of person signing for the group & title if applicable	Date
Signature for Student Association President	Date
Signature of Dippikill Guest Services Manager	Date