The University of Arizona Commercial and Campus Use Activity Request Form



Campus Use and Event Planning Office • Student Union Memorial Center • Room 348 Phone: (520) 626-2630 • Fax: (520) 621-2545 • Page 1 of 3

			Date Received:			
	•	ompleted and approved by the Arizona S OR TO EVENT. Please type or print legibly.	udent Unions Mall Event Planning Office a minimum of			
Sponsoring Organization		Event	Event Title			
Cor	ntact Person(s)	Phone	Email			
Loc	cal Address, City/State		Zip			
		ns to be sold, given away, displayed or available du ills. Attach a separate sheet if necessary.	ring event. Also list event particulars including vehicles, tents, tables,			
Ple	ase list all business/corpo	orate sponsors for this event.				
Dat	eals) Requested	Time Requested (starting a	d anding)			
Dai	ects/ nequested	Time nequested (starting at	d ending)(including setup and take down)			
Are	ea(s) requested (see map)		Expected Attendance			
WI	ILL THE EVENT USE O	R REQUIRE ANY OF THE FOLLOWING:				
»	Sound amplification? [] YES [] NO	If yes, please describe.				
	Amplification is allowed only	y between noon - 1 p.m., Monday through Friday and 5 - 7 p	m. Monday through Thursday. (Weekend requests are considered separately).			
»	Equipment/Services?	Facilities Management Grounds notification?				
	[]YES []NO	·	ent to arrange service and payment. All transactions will be by check only. STS FOR MALL ACTIVITY MUST HAVE A SIGNATURE FROM FACILITIES MANAGEMENT. ent for cleanup.)			
	Facilities Mgmt. Special Even	ts, Millie La France (621-7332, fax: 626-2918) Date				
»	Food/beverages?					
	[]YES []NO	If yes, signature approval must be obtained from the Dini Food on UA mall may require Pima County Health Permit.	ig Services Director or his designee.			
	Sr. Associate Director, Arizon	a Student Unions, Joe Sottosanti (SUMC, 621-7039, fax: 621-	(545) Date			
»	Alcohol? []YES []NO	No alcohol may be served or sold on University property from the Event Planning office. For more information, go t	without written permissions, i.e., Permit to Serve Alcoholic Beverages on Campus, o www.union.arizona.edu/alchohol			
	Event Planning Office (SUMC	, 621-1989, fax: 621-2545)	Date			

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[]YES []NO		J Transmortation at	621 2710 five			
	If yes, contact Parking and If road closures or barrica	•		(5) business days prior to your event to arrange access. ee weeks lead time.		
Carmen Delahanty (621-37	(10, fax: 621-7055) Special Even	ts Parking	Date	Barricades & Routes, Elisa Tapia (621-3300)	Date	
Any Campus Road Cl	osures?					
Contact Parking and Transportation at 621-3300 three (3) weeks prior to event. THIS FORM DOES NOT APPROVE ROAD CLOSURE. ALL ROAD MUST HAVE BARRICADE PLAN AND SIGNATURE FROM DIRECTOR OR ASSIGNED REPRESENTATIVE OF PARKING AND TRANSPORTATION.						
Elisa Tapia, 621-3300 Fax 6	21-9898 Road Closure, Barricad	de Plans and Walk/	'Run/Bike Ro	Date Date		
University Trademar	ked Items?					
[] YES [] NO If yes, please obtain approval from the Director of Trademarks & Licensing at ICA.						
Alixe Holcomb (McKale 24	6E1, 626-3077, fax: 621-2656)				Date	
	red depending on propo dams-Riester and UAPD Repre	=		o to determine if needed.		
Kathy Adams Riester (621-	0884, fax: 626-3515)	Date	UAPD Re	presentative (626-6728, fax: 626-9460)	Date	
Will the event involve	e commercial activity?					
[] yes [] no If yes, ATTACH COPIES of appropriate licenses, a privacy agreement and a list of promotional items. Approval must be granted two (2) calendar weeks in advance.						
UA Bookstore Assoc. Dir., D	ebby Shively (621-7151, fax: 62	6-8098)			Date	
Private Vendor Name			Private	Vendor Contact Person		
Phone	_ Fax	Address			Zip	
License # OR Tay ID # (OR Tay Even of # /for Non	-Profit Adancies	١			
	on tax Exempt # (for from	_		endor per semester. Corporate fees are detern		
	100/day; walks/runs \$50					
Vendor fees: start at \$						
Vendor fees: start at \$: Amount to be paid to c	onfirm reservation \$					
Vendor fees: start at \$ Amount to be paid to c Evidence of liability i	onfirm reservation \$	be required de	epending o	n the proposed activity. Proof of Insurance	must be provided in	
Vendor fees: start at \$ Amount to be paid to c Evidence of liability i	onfirm reservation \$	be required de	epending o	n the proposed activity. Proof of Insurance	must be provided in	
Vendor fees: start at \$ Amount to be paid to o Evidence of liability i 10 business days pric	onfirm reservation \$	be required de be cancelled.		n the proposed activity. Proof of Insurance	must be provided in Date	
Vendor fees: start at \$: Amount to be paid to c Evidence of liability i 10 business days pric Risk Management-Insurance	nsurance coverage may or to event or event will l ce Officer, Herb Wagner (220 W	be required debe cancelled. V. 6 St., 621-7691, fax tures overnight nust be obtained fro	t on the Ma		Date	
Vendor fees: start at \$ Amount to be paid to continue to business days price. Risk Management-Insurance. Will the event require [] YES [] NO	nsurance coverage may or to event or event will l ce Officer, Herb Wagner (220 W e use of temporary struc If yes, signature approval m	be required debe cancelled. V. 6 St., 621-7691, faxetures overnight aust be obtained from the coordinate B	t on the Ma	ıli?	Date	
Amount to be paid to c Evidence of liability i 10 business days price Risk Management-Insurance Will the event require [] YES [] NO Asst. Dean, Kathy Adams Ri	nsurance coverage may or to event or event will l ce Officer, Herb Wagner (220 W e use of temporary struc If yes, signature approval m contact Facilities Managem	be required debe cancelled. V. 6 St., 621-7691, faxetures overnight aust be obtained from the coordinate B	t on the Ma	ıli?	Date please have sponsor	
Amount to be paid to c Evidence of liability i 10 business days price Risk Management-Insurance Will the event require [] YES [] NO Asst. Dean, Kathy Adams Ri Date(s) requested for co	nsurance coverage may or to event or event will less of temporary structions. If yes, signature approval montact Facilities Managemeiester (621-0884, fax: 626-3515) overnight use:	be required debe cancelled. V. 6 St., 621-7691, fax Etures overnight uust be obtained fro ent to coordinate B	t on the Ma om the Assista lue Staking.	ıli?	Date please have sponsor	
Amount to be paid to c Evidence of liability i 10 business days price Risk Management-Insurance Will the event require [] YES [] NO Asst. Dean, Kathy Adams Ri Date(s) requested for co	nsurance coverage may or to event or event will leve Officer, Herb Wagner (220 We use of temporary struction of the contact Facilities Managem dester (621-0884, fax: 626-3515) overnight use:	be required debe cancelled. V. 6 St., 621-7691, fax Etures overnight uust be obtained fro ent to coordinate B	t on the Ma om the Assista lue Staking.	ıli?	Date please have sponsor	
Amount to be paid to c Evidence of liability i 10 business days price Risk Management-Insurance Will the event require [] YES [] NO Asst. Dean, Kathy Adams Ri Date(s) requested for co (Include details on when it Description of tempora	nsurance coverage may or to event or event will less of temporary structures. Less of temporary structures Managem contact Facilities Managem overnight use:	be required debe cancelled. V. 6 St., 621-7691, fax Etures overnight Bust be obtained from the coordinate Bust of the coordinate Bust overnight.	t on the Ma om the Assista lue Staking.	ıli?	Date please have sponsor Date	

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UA Sponsoring Dept./Recognized Student Organization	Non-UA Individuals or Organizations/Private Vendors		
I/We,	I/We, Name of Individual(s), Student(s), or Organization		
Name of Faculty, Staff, Student(s) or Organization			
agree to exercise due care in the use of the mall area and all other University proper hold the University harmless in any action resulting from or related to my use of the their organization, will take full responsibility for injury to any person or property of and expenses resulting therefrom. It is also understood that the signing individual a organization and that approval of the event does not imply any coverage by Universona, Arizona Board of Regents, and the University of Arizona as additional named \$2,000,000 aggregate, automobile liability in a minimum amount of \$1,000,000, if a prisks of the event as required by Risk Management Services. **Tree to abide by the rules as set out in the Campus Use Policy. Failures.	e mall. If permissio caused by the orga and/or their organi sity insurance. Evi- l insured, for comm oplicable, and worl	on to conduct an event is granted, it is understood that the signing individual and/or nization or members thereof and will be financially responsible for both damages ization assume all risks for any injury or loss to the property or members of the dence of insurance, by issuance of a certificate of insurance naming the State of Ari- nercial general liability insurance in a minimum single limit amount of \$1,000,000 at ker's compensation to the statutory limits, if applicable, or more as appropriate to t	
Signature of President/Treasurer/Dept. Contact	Date	President/Treasurer/Dept. Contact Name/Organization/Phone	
Signature of Sponsoring Student Organization Advisor	Date	Student Organization Advisor Name/Title/Phone	
Signature of Private Vendor	Date	Name of Private Vendor/Title/Phone	
COMMENTS/CONDITIONS			
COMMENTS/ CONDITIONS			
Event Request: [] Approved [] Disapproved Reason:	By: Cł	neryl Plummer, Mall Coordinator Date	

The Arizona Student Union reserves the right to reassign mall space to serve the greatest number of programs and services. Every attempt will be made to notify the group of a venue change promptly via email, phone or fax.

Since the University facilities are primarily intended to support the campus community, priority booking has been extended to on-campus entities. Therefore, off-campus groups will be given the opportunity to book space after student groups and campus departments. In cases where multiple groups have requested the same date, determination will be made based on those groups that best reflect the scope and mission of the University of Arizona and directly benefit the University community. These determinations will be made by the UA Campus Use Committee.

Mall requests cannot be submitted more than one (1) year in advance.

(REV 09.27.11)