

Request and Agreement for Use of Facilities, Buildings or Grounds



UNIVERSITY of HAWAII*
KAPI'OLANI
COMMUNITY COLLEGE

Must be submitted at least **Five (5) Business Days Prior to Request**

When submitting this form to the Office of the VCAS, please print this on one sheet of paper, double-sided.

Administrative Services

808.734.9531 (P) – 808.734.9162 (F)

Name of Organization (USER):		Check one: <input type="checkbox"/> UH Affiliated Program <input type="checkbox"/> Non- Profit <input type="checkbox"/> For – Profit	Date of request:
Name of Organizational Representative:			
Email Address:			
Representative's Address:		Business Phone: _____	Cell Phone: _____
Best time to be reached:			
Invoice Address:			
Date(s) of Event		Purpose of Event:	
		Admission Charges <input type="checkbox"/> Yes <input type="checkbox"/> No	
Hours of Use - Time		No. of Expected Attendance	
From: _____		To: _____	
Specific Facility Requested:			

Facility:	UH Affiliated	Non-Profit	For-Profit
Classroom(s) per hour per room	hr(s) x \$25 =	hr(s) x \$35 =	hr(s) x \$50 =
Cafeteria Rental per Hour:	hr(s) x \$75 =	hr(s) x \$110 =	hr(s) x \$150 =
Ohia 118 (Lecture Room) per hour	hr(s) x \$75 =	hr(s) x \$110 =	hr(s) x \$150 =
Parking Lot A per hour	hr(s) x \$55 =	hr(s) x \$75 =	hr(s) x \$110 =
Parking Lot B per hour	hr(s) x \$85 =	hr(s) x \$115 =	hr(s) x \$170 =
Parking Lot C per hour	hr(s) x \$75 =	hr(s) x \$100 =	hr(s) x \$150 =

**The college does not monitor event parking.

Additional Facilities and Security Charges:

Make check payable to: Kapi'olani Community College Send to : 4303 Diamond Head Road, Honolulu, HI 96816	Total Charges:
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Payment must be received 5 business days prior to the event

BEFORE Signing: I have read the Agreement for Use of College Facilities and understand and agree to abide by all the rules and regulations as stated in the policy.

Signature:	Authorized Position	Date:
Copy of insurance policy attached		

<input type="checkbox"/> Facilities Request Approved	Signature:	Date:
Facilities Request Denied:		
<input type="checkbox"/> Conflicts with college use	<input type="checkbox"/> Liability insurance coverage not submitted	
<input type="checkbox"/> Facilities unavailable	<input type="checkbox"/> Use not permitted under BOR Policy	
<input type="checkbox"/> Payment not made	<input type="checkbox"/> Other-Specify _____	
Signature:	Date:	

AGREEMENT FOR USE OF COLLEGE FACILITIES

DEFINITIONS: As used herein, "USER" means the organization making the request.

Premises shall be returned to the University upon expiration of the terms in good repair, order, and clean condition, reasonable wear and tear expected. No alterations may be made without the expressed approval of the University.

The USER shall indemnify, defend and hold harmless the University of Hawaii and the State of Hawaii, and their officers, employees, agents, or any person acting on behalf from and against: (1) any claim or demand for loss, liability or damage, including, but not limited to, claims for property damage, personal injury, or death, by whomsoever brought, arising from any accident or incident connected with the use of the facilities above assigned; (2) all claims, suits and damages by whomsoever brought or made by reason of the non-observance or non-performance of University and campus rules and policies or the rules, regulations, ordinances and laws of the federal, state, municipal or county governments. Further, the USER shall reimburse the University of Hawaii and the State of Hawaii and their officers, employees, agent, or any person acting on their behalf for all attorneys' fees, costs, and expenses in connection with the defense of any such claims.

The USER shall obtain and maintain throughout the period of use under this agreement liability insurance in an amount of at least one million dollars (\$1,000,000) for bodily injury liability arising out of each occurrence and in an amount of at least one million dollars (\$1,000,000) for property damage liability arising out of each occurrence. The University of Hawaii and the State of Hawaii and their officers, employees, and agents shall be listed as insured under the policy. Prior to the date of use, the USER shall provide to the University a certificate of insurance verifying the existence of the necessary liability coverage, including the coverage of the University of Hawaii and the State of Hawaii, and their officers, employees, and agents. A current certificate must be submitted for each facility use application. _____

Non-institutional users of University facilities must clearly indicate in all promotional material that the program or activity is neither sponsored nor endorsed by the University of Hawaii. Furthermore, such users shall operate the program or activity on a not-for-profit basis.

USER shall abide by UH Board of Regents Policy E10.201 and Section 20, Chapter 13 "Use of University-Owned Facilities" as well as all laws that govern the United States of America and the State of Hawaii.

The USER will take full responsibility for:

- 1) Making arrangements for any special preparation of facilities;
- 2) Restoring furniture and equipment as originally arranged;
- 3) Cleaning up all areas affected and disposing trash in outside dumpsters;
- 4) Preventing use of intoxicants on the premises;
- 5) Observing of "No Smoking" ban where indicated;
- 6) Preventing games of chance on the premises;
- 7) Maintaining law and order;
- 8) Turning off equipment and lights in rooms, hallways, and restrooms before leaving;
- 9) Ensuring that persons attending this function will park only in authorized parking areas.
- 10) Providing the name and contact information for the responsible person(s) (*if not the same as the requester*) on the day(s) of the event.

Name: _____ Phone (Mobile Phone): _____

Please be advised that air conditioning may not be available for your event.

The College reserves the right to move your event to a similar facility in order to meet its primary mission of higher education.

REMINDER: University policy is that no smoking is allowed in its facilities, nor is it permissible to bring food or drink into any of the classrooms unless specifically approved by the University.

I have read, understand, and agree to the above conditions.

Signature of Person Assuming Responsibility

Authorized Position

Printed Name of Person Assuming Responsibility

Date

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