APPLICATION FOR USE OF FINE ARTS BUILDING THEATER

Use of Theater includes Green Room and Dressing Rooms. Use of additional space must be reserved separately.

Please return original to:

Jeff Roop, Theater Manager
St. Charles Community College, FAB 103
4601 Mid Rivers Mall Drive
Cottleville, MO 63376

<table>
<thead>
<tr>
<th>Application Date</th>
<th>Name of Organization</th>
<th>☐ NonProfit</th>
<th>☐ Profit-Making</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person Making Application</td>
<td>Title/Role in Organization</td>
<td></td>
<td></td>
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<tr>
<td>Street Address</td>
<td>City/State/Zip</td>
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<tr>
<td>Phone Number</td>
<td>E-Mail Address</td>
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<tr>
<td>Fax Number</td>
<td>Website</td>
<td></td>
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<tr>
<td>Date(s) Wanted</td>
<td>Event Time:  From ___________ to ___________</td>
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<td>Event Time:  From ___________ to ___________</td>
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<td></td>
<td>Event Time:  From ___________ to ___________</td>
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<tr>
<td>Will you be charging admission to your event?</td>
<td>☐ Yes  ☐ No</td>
<td></td>
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<tr>
<td>If yes, how much?</td>
<td>________________</td>
<td></td>
<td></td>
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<tr>
<td>Estimated attendance</td>
<td>________________</td>
<td></td>
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<tr>
<td>Is special room setup required?</td>
<td>☐ Yes  ☐ No</td>
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<tr>
<td>Is yes, please describe your needs. Attach a separate sheet if necessary.</td>
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<tr>
<td>I certify that I have read and understand the attached provisions of the application, including the Community Use Procedure/General Requirements, and agree to be bound by the provisions of this permit.</td>
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</tbody>
</table>

Organization Applying ___________________________ By: ___________________________ Sponsor’s Signature ___________________________

(FOR OFFICE USE)
Copies to: Arts and Humanities Dean

Application received by ___________________________ Date ________________

Application approved by ___________________________ Date ________________

Deposit Received $___________ Date _______________ By ___________________________

Final Payment Received $___________ Date _______________ By ___________________________

Projected Rental Hours ___________________________
@ $_________ per $25 per (personnel)

Projected Rental Fee $_____________________

Deposit Due $_____________________

Final Rental Hours ___________________________

Additional Charges $_____________________

Total Rental Fee $_____________________

July 2010
ST. CHARLES COMMUNITY COLLEGE
FINE ARTS BUILDING THEATER
LETTER OF INDEMNIFICATION

This letter must be signed by the official representative of the organization that wishes to use College facilities.

Applicant is responsible for the payment of all charges.

Applicant is responsible for payment of any damages to College facilities.

Applicant is responsible for the observation of rules and regulations for use of College facilities as established by the St. Charles Community College Board of Trustees.

Applicant is responsible for the preservation of order at the event for which facilities are to be used.

Applicant agrees to hold harmless the St. Charles Community College District, its officers and employees, for any injury to persons to whom facilities are rented, for any injury to any person connected with the activity, or for any injury to any person who may be in attendance at the event.

Applicant agrees to hold harmless the St. Charles Community College District, its officers and employees, for liability to damage to property belonging to the applicant or the applicant’s organization.

The applicant agrees that the presence of any employee of the St. Charles Community College District does not relieve the applicant of any of the applicant’s responsibilities or duties.

__________________________________              ____________________________________
Signature of Applicant                                                                                      Date

__________________________________
Name of Organization