



Atlanta Metropolitan State College

Application for use of Campus Facilities Off-Campus Application

This application must be completed and returned to the Office of the Conference Center Manager, Library Building-210, no later than (10) working days prior to the scheduled event. (Please type or Print)

Please select the room(s)/area requested: Academic Building 210__ Conference Room A __ Conference Room B__
Conference Room C__ Charles Easley Conference Pavilion__ Gymnasium__ Outside Patio__ Pavilion North __
Pavilion South __ Other _____

Contact Name: _____ Date: _____

Contact Address: _____ Phone: _____

Company/Agency Name: _____ Title of the Event _____

Description of the Event _____

Date of Event: _____ "Actual" Start Time: _____ "Actual" End Time _____

College Catering? Yes No Number of People Attending: _____

(Groups may NOT bring in their own food unless written approval is obtained from AMSC College Cafeteria)

Equipment/Service Requested: (Please see the Audio/Visual form, below, for additional options)

Round Tables #: _____ Eight Ft. Tables:#: _____ Chairs#: _____ Tables for Food#: _____

Tables for Handouts/Registration# _____ Podium W/Microphone: _____ Screen: _____

LCD Projector: _____ Microphone#: _____ Lapel Microphones#: _____ Stage: _____

Other Requests: _____

Tables/Chairs setup arrangement: U-Shaped Round Tables Theater Style Classroom/Testing

I do hereby acknowledge that I have read the Atlanta Metropolitan State College facilities rental terms and conditions and agree to pay the below stated fee.

Company/Agency Authorized Signature: _____ Date: _____

For Office Use

Room Rental Fee: _____

Additional Fees: _____

Total Fee: _____

50% Deposit Required: _____

Request Approved: ___ Disapproved: ___

Chief of Public Safety Signature (Required for large events)

Request Approved: ___ Disapproved: ___

Conference Center Manager's Signature