

Cañada College 4200 Farm Hill Boulevard Redwood City, CA 94061 Voice 650-306-3271 Fax 650-306-3171		Today's Date _____
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Facilities Reservation Request

BY INDIVIDUALS, CLUBS OR ORGANIZATIONS DIRECTLY AFFILIATED WITH CAÑADA COLLEGE

APPLICATION MUST BE RECEIVED 2 WEEKS PRIOR TO THE DATE OF USE

Your Name: _____ Division: _____ Phone: _____

Cell Phone: _____ E-mail: _____

Club/Organization Name: _____

Event Type: (Check One) Athletics _____ Film _____ Lecture _____ Meeting _____ Reception _____
 Rehearsal _____ Performance _____ Other _____

Please list Event Name/Title: _____

Please list Event Date(s): _____

PLEASE INCLUDE SET-UP AND CLEAN-UP TIME

Arrival Time: _____ A.M. or P.M. Time Event Begins: _____ A.M. or P.M.

Time Event Ends: _____ A.M. or P.M. Time of Departure: _____ A.M. or P.M.

Total Hours: _____

Expected Number Attending: _____

Please list Rehearsal Date(s): _____

PLEASE INCLUDE SET-UP AND CLEAN-UP TIME

Arrival Time: _____ A.M. or P.M. Time Event Begins: _____ A.M. or P.M.

Time Event Ends: _____ A.M. or P.M. Time of Departure: _____ A.M. or P.M.

Total Hours: _____

Expected Number Attending: _____

PLEASE INDICATE THE FACILITY OR FACILITIES REQUESTED:

Athletics	Academic Buildings	Fine Arts	Auxiliary Spaces
_ Gym (max Capacity 1550)	_ Classroom (10-25 capacity)	_ Main Theatre (max capacity 520)	_ Cafeteria (max capacity 270)
_ Men's dressing room with showers	_ Classroom (26-45 capacity)	_ Flex Theatre	_ Parking lot
_ Women's dressing room with showers	_ Classroom (46-100 capacity)	_ Multipurpose room 3-142 (max capacity 100)	_ Frisbee lawn
_ Tennis courts (number requested _____)	_ SMART Classroom	_ Multipurpose room 3-148 (max capacity 75)	_ Front Plaza _ Back Plaza
_ Baseball Field	_ Science Lab _ Computer Lab	_ Art Gallery/Foyer/Lobby	
_ Soccer field	_ Library		
	- Learning Center		

Has this location been reserved? Yes ___ No ___

Are you having concessions? Yes ___ No ___ If yes, please describe _____

Are you serving food? Yes ___ No ___ If yes, please describe _____

Are you selling tickets? Yes ___ No ___ If yes, how much will you charge? _____

Are you charging attendees a fee? Yes ___ No ___ If yes, how much will you charge? _____

Are you anticipating Traffic/Parking Needs? Yes ___ No ___

(If yes, check all that apply): ___ Reserve Parking Spaces # _____

___ Reserve Parking Lot # _____

___ Suspend Parking Regulations (except at metered lots)

___ Directing Traffic Flow

SPECIAL REQUIREMENTS NEEDED:

_ LCD Projector	_ Opaque Projector	_ Microphones	_ 6' Tables (number requested _____)
_ VHS Projector	_ Theatre Lighting	_ Music Stands	_ Chairs (number requested _____)
_ DVD Projector	_ Theatre Sound System	_ Podium/Lectern	_ Barbecue
_ Slide Projector	_ Portable Sound System	_ Portable Stage	_ 10'x10' Canopy (number requested _____)
_ Overhead Projector	_ Background Music		_ Trash Cans (number requested _____)

Other (Please Specify) _____

*Technicians are required for many of the facility rentals. Equipment is not included in facility rental fees.
All rental contracts must employ union custodial crew provided by the district. Security fees will apply as well.*

Please estimate, initial and return as soon as possible:

Estimated rates: (All are charged at 2 hour minimums)

Custodial - \$46/hr Engineering - \$55/hr Grounds - \$40/hr Security - \$50/hr Technician - \$45/hr

Custodian \$ _____ Engineering \$ _____ Grounds \$ _____

Security \$ _____ Technician \$ _____ Total Costs: \$ _____

SET-UP DIAGRAM:

(PLEASE DRAW ANY SPECIFIC SET-UP NEEDS YOU MAY HAVE AND/OR ATTACH ADDITIONAL INFORMATION IF NEEDED)

Requestor's Signature _____ Date _____

*College Accounts need Division Dean's signature
Trust/Club Accounts need Student Activities Coordinator's signature*

College or Trust/Club Account Number: _____ - _____ - _____ - _____

Requestor's Signature _____ Date _____

Advisor's Signature _____ Date _____

Dean/Student Activities Coordinator's Signature _____
Date _____

**Please send completed application to the attention of Rachel Corrales at
corrales@smccd.edu, 650 306-3271.
Application must be received 2 weeks prior to the date of use.**