

Morris Dailey Auditorium

Student Union, Inc. of San José State University

Reservation Form of Non-Academic Events

Organization: _____ Today's Date: _____

Advisor: _____ Phone: _____

(Must be present during the entire use of Morris Dailey Auditorium)

Primary Contact _____ Phone: _____

Email: _____

Event Title: _____ Event Date(s): _____

Access Time: _____ Doors: _____ Event Start: _____ Event End: _____ Exit Time: _____

Please provide a brief description of the event: _____

Estimated Attendance: _____ Admission Fee: \$ _____ Monetary Transactions: Yes No

Technical Services: Yes No If yes, please list provider: _____

**Reminder: FOOD/DRINKS ARE NOT ALLOWED IN THE AUDITORIUM AND FOYER.
PLEASE KEEP ALL FOOD AND DRINKS OUTSIDE OF THE BUILDING.**

Use of music on campus for events and programs must comply with SJSU/SU Music License requirements with BMI, ASCAP, SESAC, and Global Music through their respective websites: BMI.com, ASCAP.com, SESAC.com, and GlobalMusic.com.

Client agrees to indemnify, defend and hold harmless the Student Union, Inc. of San José State University, San José State University, the Trustees of California State University and the State of California, their officers, agents and employees from any and all liability, claim, loss, cost or obligations on account of or arising out of injury, death or damage to persons or to property from whatever cause where such injury, death or damage is connected with the event, use or services scheduled.

By signing below, I understand that I must contact the Technical Production Lead at (408) 924-6365 to coordinate the operations of the facility. Failure to do so at least 21 DAYS prior to the event, will lead to a cancellation of the event. I also understand that by law, at least ONE authorized representative of Student Union, Inc. must be present for every 250 people within the facility (including members of the organization, guests, patrons and volunteers) for crowd management.

I understand that no food or beverages are permitted in the auditorium.

I, on behalf of, and as an authorized agent of the above named organization, agree to abide by the policies of the San José State University and the Student Union, Inc. regarding the use of the facilities. I have read and understand all policies regarding fees, cancellations, and no shows.

Advisor Signature

Date

THIS SECTION BELOW IS TO BE COMPLETED BY ADMINISTRATION ONLY

Student Union Event Services Signature

Date

Approved/Denied

Additional Requirements: _____