



**REQUEST FOR USE OF PUBLIC SPACES IN HARRY C. MOORE LIBRARY & INFORMATION CENTRE
(**INTERNAL (UB) APPLICANTS ONLY)**

Return completed form to Loniece L. Miller (loniece.miller@cob.edu.bs) Harry C. Moore Library Administrative Office

Name of School/Department/ Club: _____

Type of Event (concert, film, play, recital, exhibition, lecture, etc): _____

Briefly describe event, including purpose:

Space requested: () Auditorium ***maximum capacity: 114 persons** () Exhibition Spaces only () Reception Area () Porches
 () Lawn Surrounding the HCM Library

Fee Structure: \$48.38 (\$45.00 + \$3.38 VAT) per hour for internal bookings and an additional flat rate of \$48.38 (\$45.00 + \$3.38 VAT) for Janitorial Fee & Fuel Surcharge. **All fees are to be paid 7 days before the event.**

Additional requirements:
 Podium Clavinovia Special Lighting Microphone (1) (2) Projector Laptop

Days Requested			Pre-Event		Event		Post - Event
Day	Day of Week	Date (d/m/y)	Set Up		Time Event Begins	Time Event Ends	Clean Up/ Load Out
			Arrival Time	End Time			
1							
2							
3							

Any Other Requirement (specify): _____

1. _____
2. _____
3. _____

Contact Person: _____

School/Dept./Club Affiliate: _____

Phone: _____ **Fax:** _____ **Alt. Phone:** _____ **Email:** _____

I certify that the information above is accurate and that the event **will comply with the maximum capacity** as noted above. All associated fees will be paid prior to the event or shortly thereafter. I understand that if approved, my signature constitutes a binding contract between myself and the Harry C. Moore Library & Information Centre (HCML&IC) administrators and that completion of this form does not constitute confirmation of the event. Confirmation or rejection will be communicated to the applicant after assessment by the HCML&IC staff. ***Payment can be made by cash, bank draft or credit card, excluding American Express. Bank drafts should be made out to "University of The Bahamas"; additional details are not required.***

Signature of Applicant/School Chair/Dept./Club Head* (if applicable) _____

Date: _____

Print name and title: _____

*The UB School/Dept./Club Head must authorize the commitment of funds on their behalf.

You will be notified of the decision regarding your request within the time frame specified in the policy on Access to Public Spaces.

For Office Use: **Approved** _____ **Not Approved:** _____ **Signature:** _____ **Date** _____