

Ohio Valley University Facilities Use Form

Please complete the Facilities Use Form and return it to the University's receptionist. **Reservations are not confirmed until renter has submitted the completed Facilities Use Form along with the 50% deposit. The remaining rental fee is due anytime prior to the date of the event.**

Logistics:

Date and Time of Event _____ Desired Date and Time of Set-Up Completion _____

Name of Event/Organization _____

Facilities Requested _____

Minimum Attendance Expected _____ Maximum Attendance Expected _____

Responsible Party Signature _____

Phone (Home) _____ (Work) _____

Address _____

Costs:

North Campus

Chapel.....\$400/day

Classrooms.....\$50/day

Student Center.....\$50/day

South Campus

Fox Dining Hall.....\$400/day

Erickson Theater.....\$300/day

Athletic Facilities

Snyder Activity Center.....\$300/day

Alumni Gym..... 200/day

Softball Field..... 100/day lined

* ALL PRICES ARE FIRM AND NON-NEGOTIABLE

Please initial all items that pertain to the facility you wish to rent.

1. _____ I have reviewed the above information and agree with it as written.
2. _____ I agree that the members of my group will abide by all University rules including those that forbid drugs, alcohol, tobacco (any form), and dancing on campus.
3. _____ I understand that the University will not be held responsible for personal injury for group members or the loss or damage of any personal property of visitors or participants in my group.
4. _____ I agree to be responsible for pick-up and return of the outside door key from the OVU Receptionist's office (North Campus) between 9am-5 pm, Monday-Friday.
5. _____ I will be responsible for turning off all lights and locking the exterior doors.

I, the undersigned, have read, understand, and agree to abide by the rules and regulations set forth in this agreement. I also agree to release Ohio Valley University from any and all claims, damages, actions, judgments, decrees, penalties, and/or damaged property arising out of the use and occupancy of the premises. I also agree to hold Ohio Valley University harmless for any loss, theft, burglary, and damage, etc., to any and all possessions and property belonging to the facility user (i.e.: "person(s) in charge"), guests, agents, promoters, employees, etc. Ohio Valley University shall have the right and discretions to post and maintain, on the premises, the notice of non-responsibility under the laws of the State of West Virginia.

Signature _____ Date _____

Ohio Valley University Facilities Use Form

DIAGRAM:

Please provide a rough sketch of the set-up that you require. *Be sure to indicate the exact number and type of tables and chairs that are needed.*

Diagrams MUST be received by maintenance a minimum of two weeks prior to the event to ensure set-up deadline can be met. Also, ample time between separate set-ups must be allowed.

*Return form to Receptionist, Ohio Valley University, 1 Campus View Drive, Vienna WV 26105-8000.
Call 304-865-6000 if there are questions.*

****Maintenance Department Use Only****

Assigned to: _____ Setup completed: (Date) ___/___/___

___Area(s) cleaned

___Bathroom(s) stocked

___Bathroom(s) cleaned

Start/Finish Time: _____/_____ Signature _____