



LONG BEACH CITY COLLEGE DISTRICT

"HOME OF THE VIKINGS"

4901 E. Carson St., G-9

Long Beach, CA 90808

Phone: (562) 938-4019 Fax: (562) 938-4069

APPLICATION FOR USE OF DISTRICT FACILITIES

(PLEASE NOTE, INSURANCE WILL BE REQUIRED, AND APPLICATION MUST BE RECEIVED AT LEAST 14 DAYS PRIOR TO EVENT)

NAME OF ORGANIZATION/GROUP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ MAIL CODE \_\_\_\_\_

EMAIL: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

LBCC SCHOOL ACTIVITY (Details on how it is directly related to LBCC Students is required):

\_\_\_\_\_

NON-SCHOOL ACTIVITY:

\_\_\_\_\_

\_\_\_\_\_

WILL ALCOHOL BE SERVED: Y ( ) N ( )

OPEN TO THE PUBLIC: Y ( ) N ( )

ESTIMATED ATTENDANCE: \_\_\_\_\_

CAMPUS FACILITY REQUESTED: (PLEASE CHECK)

- o LIBERAL ARTS CAMPUS, (LAC) 4901 E. CARSON ST., LONG BEACH, 90808
o PACIFIC COAST CAMPUS, (PCC) 1305 E. PACIFIC COAST HIGHWAY, 90808
o VMS, 5000 E. LEW DAVIS, LONG BEACH, 90808
o OTHER \_\_\_\_\_

Table with 5 columns: FACILITIES NEEDED, DAY OF THE WEEK, EVENT DATE(S), HOURS USED FROM, HOURS USED TO. Includes two rows of blank lines for data entry.

DESCRIBE ANY ADMISSION FEES OR CHARGES RELATED TO THIS EVENT:

\_\_\_\_\_

SPECIFY REQUESTS FOR AUDIO/VISUAL, SPECIAL EQUIPMENT, CUSTODIAL SERVICES, OR TABLE/CHAIR SET-UP, ETC:

\_\_\_\_\_

\_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_
(Please print)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_
Dean/Dept. Head/Athletic Dir. /VP (Mandatory if LBCC event)
Please print