

UNIVERSITY ACTIVITY CENTER POLICIES AND PROCEDURES

The Florida A & M University Activity Center is an Education & General Services facility with the mission of providing meeting space for FAMU Departments and small official FAMU events. FAMU extends the use of the University Activity Center to FAMU departments, on-campus organizations, University Personnel, alumni, retirees, and not-for-profit community organizations on condition of compliance with policies and procedures governing the facility.

This document outlines the booking and use procedures for the University Activity Center. It constitutes the agreement between all users and the University Activity Center management. Compliance with these policies and procedures is required. Failure to comply with these policies and procedures is considered justification for denial of use of the facility.

I. LOCATION

The University Activity Center (AKA "FAMU Clubhouse") is located at 2412 South Adams Street, Tallahassee, Florida 32307.

II. RESERVATIONS AND APPROVALS

- **A.** On-campus bookings are made through the iStrike booking approval system. Off-campus and individual reservations must be booked through the Events Department Operations Office at (850) 412-5966. In addition to the procedures below, all bookings require a completed and approved **University Activity Center Event Summary Form**, along with the **Facility Request & Event Approval Form** from the Office of Student Union Activities, (850) 599-3400.
- B. The Office of the President has priority over any event that is scheduled at the UAC. Upon receiving a request from that office, conflicting bookings will be canceled.
- C. Requests for use by non-E & G University or official campus organizations must be processed through and signed by the **Events Department Director** or his designee.
- D. Requests from not-for-profit organizations require approval from the **Chief Communications Officer**, (850) 599-3413. Off-campus users of the University Activity Center must be not-for-profit organizations with valid 501(c)(3) tax exempt status whose events meet University standards.

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E. University Activity Center events are required to reflect the dignity and decorum of the University itself. Behavior that does not meet this standard shall result in the cancellation of the event and denial of further applications.

All forms, with deposit (see below) must be submitted 5 days prior to the event date. The balance of the fee is due no later than 3 days in advance of the event date.

III. HOURS OF OPERATION

Sunday thru Thursday 8:00 a.m. – 11:00 p.m. Friday thru Saturday 8:00 a.m. – 1:00 a.m.

IV. RENTAL FEES

The University Activity Center is an E & G facility, available for E & G events for academic or official University purposes i.e., funded by the Education and General Services budget line, at no cost to users. All non-E & G activities will be charged for use at the following rates:

- \$150 minimum first four hours of use.
- \$40 each additional hour over four.
- \$50 Cleaning fee (required).

All non- E&G events are to be paid for with a money order or cashier's check payable to Florida A&M University. The University reserves the right to change the facility usage fee structure at any time and without advance notice.

Each non-E & G booking requires a \$50 deposit to be paid at the time of the booking. This "Good Faith Deposit" is deducted from the final cost of the facility.

Rental is not transferrable. No client group/organization is allowed to provide the building to other requestors.

V. INSURANCE

All University Activity Center events require special event insurance. Contact the Risk Management Office (850-599-3453) for policy requirements. While the client may choose their insurance provider, some clients have been satisfied with the online insurance provider https://www.theeventhelper.com/. Events without special event insurance confirmation through the Risk Manager's Office within two working days before the event shall be cancelled.

VI. CANCELLATIONS

Failure to notify the Events Department of a cancellation less than three working days before the scheduled event will result in a loss of the \$50.00 deposit.

VII. KEY ACCESS

No group or organization will be allowed to have a key to the University Activity Center. Only the Events Department Operations Office will provide key access.

VIII. NUMBERS OF PARTICIPANTS

Maximum occupancy indoors at the University Activity Center is 50 people. There is no maximum for use of the outdoors.

IX. SMOKING

All open flames, including cigarette smoking and candles, are strictly prohibited. Smoking outside the facility is not permitted within 50 feet of the building entrance or exits.

X. ALCOHOL

Use of alcoholic beverages are only permitted by the FAMU Board of Trustees approved alcoholic beverage approval procedure. An Alcohol Permission Form must be submitted no less than two weeks in advance of your event to be approved.

X. FURNISHINGS AND FEATURES

- A. The facility use may include the outdoor area if permission is granted. Outdoor use permits the use of grills, picnic settings, etc. Specific arrangements must be approved in advance.
- B. Outdoor cooking equipment can be set up no closer than 50 feet to the building. Appropriate fire and safety conditions including close access to a fire extinguisher must be met.
- C. The facility is equipped with an audio-visual system for meetings and instructional purposes. Use of this equipment is on the condition that the user will replace it if damaged.
- D. The kitchenette is equipped with food warming boxes, a refrigerator, freezer, ice machine and microwave oven. The use of these items comes with the fee, but they must be left clean and in the condition in which they were found.
- E. The UAC is furnished with tables and chairs, which may not be removed from the premises. Other furnishings may be used if requested, but the furnished chairs and tables must be stacked and stored in the building.
- F. No other furnishings are covered by this agreement. Additional requests will incur additional charges.

XI. OTHER USAGE CONSIDERATION

- A. Catering: The University has an exclusive, first-right-of-refusal food services agreement with Metz Catering which includes catering services at the University Activity Center. Please contact them for your catering at (850) 412-7146, email ma4017catering@metzcorp.com: Use of other caterers can only be approved by Metz through the catering waiver process.
- B. Events scheduled at the University Activity Center may not be accessed prior to the agreed-upon starting time and must be vacated by the agreed upon ending time.
- C. No wall decorations are permitted.

- D. Rental of the facility for purposes of business solicitation, political fundraising or profit-making activities of any kind are not permitted.
- E. No advertising materials may be displayed at any function.
- F. Trash is to be placed in the trash containers by the group using the building.

XI. DAMAGE LIABILITY

The user is financially responsible for damages to and thefts of University property which occur as a result of the scheduled event.

I have been notified of the rental fees of \$150 per four-hour ev	vent plus \$40 for each additional hour.
	(initials)
I have been notified of the exclusive right of Metz Catering to Activity Center and will comply with this regulation.	provide all catering services in the University
	(initials)
I have been notified of the required cleaning fee of \$50.	(initials)
I have been notified of the requirement for special event insur	rance (initials)
I have been notified of the alcohol policy and will comply.	(initials)
I will follow all rules and regulations in this documentSi	ignature DATE
Print Name	

UNIVERSITY ACTIVITY CENTER EVENT SUMMARY FORM

CONTACT: Event Department Business Office (850) 412-5966 voice ♦ (850) 412-5991 fax

REQUESTORS WILL BE NOTIFIED IF/WHEN REQUEST HAS BEEN APPROVED PER CONTACT INFORMATION BELOW

Please fill out completely. Incomplete information will disqualify your application.				
REQUESTOR IN	NFORMATION			
Contact Person:	Telephone Numbers: (W)			
Organization:	FAX:			
Address:	(C)			
	e-mail:			
	Account Number:			
	•			
Event Name/Purpose	SPACE REQUESTED:			
Date Requested:	Your Arrival Time:			
(Note: Each date requested must be on a separate page)				
Estimated Length of Event:	Event Start Time:			
	OFFICE USE ONLY			
Contact Person's Signature:	Reservation #			
Approved By:	Date Received:			
University Approval Only.				
	Received By:			
EVENT DES	CRIPTION			
This section MUST BE FILLED OUT COMPLETEL	Y AND ACCURATELY for booking to be approved:			
Inadequate detail will disqualify your application.				
madequate detail win disquality your appreciation.	Requests without documentation may be defined.			
Estimated Attendance: Ticketi	ng Arrangements:			
Specific Description of your Event:				
DIRECTOR NO. 1 . 1 . 1 . 1 . 1 . 1				
PARTICIPANTS: Please give the number of people participating in	n the following categories			
NO /0 1				
MC/Speakers				
Performers				
Technicians, Stage Managers, Directors				
Band/Music Groups				
(Number of groups/type of group/number	of people in each group)			
POM Work Orders related to this Event:				
1 OW WORK Orders related to this Event.				
Facility Needs (Podium, screens, video or slide projection, furniture	e. etc):			
Thems, Treeds (2 calain) sereeis, these of older projection, failure	<i>.</i> , <i>.</i> , <i>.</i> , <i>.</i>			
ATTENTION: This form must be accompanied by th	e Florida A & M University Facility Request Form.			



Florida Agricultural and Mechanical University

TALLAHASSEE, FLORIDA 32307-3100

TELEPHONE: (850) 599-3453

INSURANCE REQUIREMENTS & GUIDELINES FOR SPECIAL EVENTS & USE OF FAMU FACILITIES

Organizations or individuals that are required to have commercial insurance for an event on Florida A&M University (FAMU) property must comply with the following requirements and guidelines. We strongly recommend that the Organization present these requirements to their insurance broker or agent to limit time and any misinterpretations.

STANDARD INSURANCE REQUIREMENTS

COMMERCIAL GENERAL LIABILITY coverage with the following minimum limits:

- \$1,000,000 Each Occurrence Α.
- \$2,000,000 General Aggregate (Gen. Aggregate \$1,000,000 if policy written for a single event) B.
- C. \$1,000,000 Products & Completed Operations - Insurance & Risk Manager must be consulted before the following events take place on University property - (carnival attractions, concerts, cook outs, food vendors, food prep operations, pyrotechnics/fireworks, etc.)

PROFESSIONAL LIABILITY coverage with the following minimum limits:

Insurance & Risk Manager must be consulted before the following events take place A. on University property (medical services i.e. examinations, evaluations, screenings, testing, etc.)

STANDARD INSURANCE GUIDELINES

- A. Accord Form 25 or other acceptable Certificate of Insurance form must be completed and signed by an insurance broker or agent.
- Coverage must be bound by a carrier rated **A** or better by A.M. Best Rating Service. B. Coverage must be bound by a carrier authorized to conduct business in the State of Florida.
- C. Contractual Liability: Certificate of Insurance must contain a contractual endorsement stating the policy is extended to cover liability assumed by the insured under the terms of their contract with FAMU. Also the name, date(s) and location(s) of the event must be listed on the Certificate of Insurance.
- D. Additional Insured: FAMU, FAMU Board of Trustees, FL Board of Governors and State of Florida must be listed as additional insured.
- E. Certificate Holder: FAMU Risk Management, 1700 Lee Hall Drive, Suite 308 FHAC, Tallahassee, FL 32307
- F. Cancellation Clause: Forty-Five (45) days written notice to the certificate holder.

All of the above stated information must be included in the Certificate of Insurance otherwise it will be necessary to return the certificate to your broker or agent for the appropriate correction(s). Evidence of Insurance must be approved and on file with the Risk Manager five (5) working days prior to the event or use of facilities. Any questions or concerns regarding this issue should be addressed to the Insurance & Risk Manager at (850) 599-3453 or fax # 412-5438.

FAMU IS AN EQUAL OPPORTUNITY/EQUAL ACCESS UNIVERSITY

Metz Culinary Management Services First Right of Refusal Waiver Request

Contact Information

,
Contact Coordinator:
Advisor:
Organization/Department:
Phone: Fax:
Email:
Quote Order Number:
Date & Time of Initial Catering Request:
Event Information
Event Date: Event Location:
Event Title: Number of Guests:
Event Start Time: Event End Time:
Explain the reason for desiring a source other than Metz Catering at FAMU and the proposed menu:
Please submit the following documents/information along with this request form for on campus events, to Florida A&M University's Catering Office at least 7 business days prior to the event if there will be less than 150 guests and 14 business days prior to the event if there will be more than 150 guests. • Provide Vendor's Certificate of Liability Insurance for \$1,000,000 naming Florida A&M University, FAMU Board of Trustees and its governing bodies as additionally insured. • Provide a copy of the Vendor's Occupational License, Health Department Certificate and Contact Information. • Please reference order number from the Metz Catering at FAMU quote. • Additional University policies and regulations are applicable. No food preparation is allowed on site. No waiver requests will be considered on or after the event date. This form must be signed and submitted to the Catering Office located in the Student Service Center, in person, by fax at (850) 412-
7147 or electronically at <u>catering@metzfamu.com</u> with a copy to the Office of Business and Auxiliary Services at (850) 561-2547 (fax). If approved, the requestor must contact the University Risk Manager at (850) 599-3453 for additional requirements.
APPROVED DISAPPROVED
REASON FOR DISAPPROVAL:

REQUEST FOR PERMISSION TO SERVE ALCOHOLIC BEVERAGES

REQUESTOR INFORMATION			
EVENT SPONSOR:			
INDIVIDUAL MAKING REQUEST:			
PHONE:			
EVENT SPONSOR CONTACT:			
PHONE:			
EVENT INFORMATION			
DATE OF EVENT:	EVENT TIMES:		
NAME OF EVENT:	_		
DESCRIPTION OF EVENT: Party Sporting Banquet	t Other (Please De	escribe)	
ESTIMATED ATTENDANCE: Students Expect	ted to Attend: 🗆 Y	'es □ No	
•			
VENUE INFORMATION			
□ ON CAMPUS □ OFF CAMPUS			
ON CAMPUS LOCATION OF EVENT: Bragg Stadium (President's	Box) 🗆 Presiden	t's House □ Facu	ılty Clubhouse
☐ Lawson Center ☐ V			
☐ Black Archives ☐ Pre			•
OFF CAMPUS VENUE:		, , ,	[F] /
Address	Name of '	Venue	
DESCRIBE VENUE (if not indoors):			
TYPE OF ALCOHOLIC BEVERAGES: Beer Wine Dist	tilled Spirits		
CASH BAR: ☐ Yes ☐ No OPEN BAR: ☐ Yes ☐ No		-	
NAME OF CORKAGE FIRM:			
☐ License ☐ Insurance ☐ Per	mit (for sales only)		
	, , , , ,		
I hereby certify that I will abide by the alcoholic beverage laws of the	he State of Florida a	nd Florida A&M Univ	ersity Policy 3.021.
			
Event Sponsor/Requester	Date		
REQUIRED SIGNATURES:			
		- 5	
Wise Described for Charlest Affician	□ Approved	□ Denied	
Vice President for Student Affairs (Only if students will be attending event.)			Date
		- B	
Door of Charles	□ Approved	□ Denied	
Dean of Students (Only if students will be attending event.)			Date
		- 5	
	□ Approved	□ Denied	
Department of Public Safety (Has received notice.)			Date
		- 5	
	□ Approved	□ Denied	
Risk Management (Has received license, insurance and permit.)			Date
		- 5	
	□ Approved	□ Denied	
Office of General Counsel			Date
		- 5	
Dr. Larry Robinson, President	□ Approved	□ Denied	
Dr. Larry Hobinson, Fresident			Date

*If students are served alcoholic beverages, they should present ID.