



ALMA COLLEGE

Application for Use of Public and Outdoor Spaces

The following information must be completed prior to submission, either in ink or on-line.

Application Information

Individual or Group Applying: _____ Date: _____

Primary Contact if different from above: _____

Local Address: _____ Phone #: _____

E-mail Address: _____

Event/Display Title: _____

Proposed Location(s): _____

Start Date: _____ End Date: _____

Installation and Safety Information

Responses to items 1 – 8 below can be submitted as an attachment as long as all questions are addressed.

1. Description of the event or display, including purpose and how the space will be used.

2. Type of Installation: Display Tables Mural Canvas Performance Sculpture
Other: _____

Materials proposed to be used:

3. Describe the installation content, colors, etc.

4. List the utilities that are needed (electric, water, gas, etc.) What will happen to the installation if the electricity, water, gas, etc. is shut off?

5. How will the costs of the project be funded?

6. What are plans or requirements for maintaining the project?

7. For art installations, if the installation falls down or apart, how far will it travel? Where will it land?

8. For temporary installations, what is the removal process and when will it be removed?

Statement of Responsibility

- I certify that the responses on this form are accurate to the best of my knowledge and that I am authorized to act on behalf of the requesting entity.
- I acknowledge that any costs that have not been approved through the college's regular budgeting process will be the responsibility of the applicant(s).
- I understand that variations from the elements described in this application made after the approval may result in the withdrawal of the approval and/or removal of any displays at the expense of the applicant(s).
- I understand that this application will not add the event to the campus calendar or replace the need for work orders.

Authorized Signature: _____ Date: _____

To be completed by Policy and Planning Council:

Date Reviewed: _____

Outcome:

___ Approved as submitted.

___ Additional information required before approval can be granted. (See attached)

___ Declined. (See attached)

Authorized signature: _____ Date: _____