



Please check one:  
 Returning Client  
 New Client

## Special Events Facility Use Agreement

Event Title: \_\_\_\_\_  
Contact Individual: \_\_\_\_\_  
Billing Address: \_\_\_\_\_  
(Street Address)

(City) (State) (Zip Code)  
Phone #: \_\_\_\_\_ Fax#: \_\_\_\_\_ Email: \_\_\_\_\_

### Event Information:

Date(s) of Event: \_\_\_\_\_ Time(s) of Event: \_\_\_\_\_  
Room Number(s): \_\_\_\_\_ # of Participants: \_\_\_\_\_

Preferred Catering:  YES  NO Vendor Used: \_\_\_\_\_  
If catering is being provided by outside resources, I agree to pay \$2.50 per person.  (Please initial)

Is your event on a weekend?  YES  NO (Please check one)  
Is your event in the evening, after 6:30pm?  YES  NO (Please check one)

*This is an agreement by and between Aims Continuing Education Authority and the Requesting Organization. Aims Community College is separate entity and not a party to this agreement. The terms of the above request to use Aims Event Center facilities are contained in this agreement. All conditions are noted on this form and the documents attached hereto, if any. These documents constitute the entire agreement.*

### Attached Documents:

|  |  |
|--|--|
| <input checked="" type="checkbox"/> Use Fee Schedule   | <input checked="" type="checkbox"/> Catering Order Form                  |
| <input checked="" type="checkbox"/> Rules and Policies | <input checked="" type="checkbox"/> Special Events, Proms and Receptions |
| <input checked="" type="checkbox"/> Room Set-up Form   | <input checked="" type="checkbox"/> Cancellation Form                    |

Actual charges may exceed original estimate due to additional fees or late cancellation fees incurred, as noted in the Fee Schedule and on the Rules and Policies. The Requesting Organization expressly agrees to pay all actual charges. If requesting a room less than ten (10) business days prior to the event, the Aims College Corporate Education Center will make every attempt possible to provide catering, media, and other requests within the short time frame but can make no guarantee for the provision of such services. Any provision of such services mutually agreed to must be attached hereto in a signed writing by the parties.

The Requesting Organization as the user of this facility shall indemnify and hold harmless Aims Continuing Education Authority from and against any and all causes of action, loss, costs (including attorney's fees), damages, expenses and liability (including statutory liability and liability under workman's compensation laws) in connection with claims for damages arising out of the performance of this agreement, including but not limited to, injury or death of any person, or damage to any property resulting from any act or neglect in connection with the use of Aims Continuing Education Authority premises by users, users' agents, employees, invitees, attendees, or subcontractors whether seen or unforeseen.

**My signature indicates that I have read and agree to all of the conditions and guidelines in this document and the attached documents as noted above. I expressly agree to be held responsible for all the fees associated with this contract.**

I, \_\_\_\_\_ agree to the above conditions.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

Aims College Corporate Education Center agrees to the above conditions:

\_\_\_\_\_  
Event Planner Date