

HIGHLAND COMMUNITY COLLEGE

KLINFELTER FARM

FACILITY RESERVATION REQUEST

1. Complete the form below and forward to the President's Office.
2. Copies of completed form with approval and charges, if appropriate, will be distributed to HCC officials and to the parties making the request.

Part I: To be completed by the individual and/or organization requesting use of the Klinefelter Farm facility.

Check Klinefelter Farm facility(ies) requested:

- | | |
|--|---|
| <input type="checkbox"/> Barn Conference Center | <input type="checkbox"/> Cottonwood Campground (below barn) |
| <input type="checkbox"/> Ropes Course | <input type="checkbox"/> Norton Creek Campground (west timber area of farm) |
| <input type="checkbox"/> Trail System/Cross Country Course | <input type="checkbox"/> Front yard picnic area |
| <input type="checkbox"/> Research plots (field day demonstrations, etc.) | <input type="checkbox"/> Farm tour |

1. Date/Time of Activity: ___/___/20___ Set-up Time: _____ am pm

Time Event Begins: _____ am pm Departure Time: _____ am pm

2. Type of Activity (detailed description):

Number of persons expected to attend: _____

3. List Official in charge of activity and organization represented:

Phone: (_____) _____ Email: _____

Mailing address (if non-College activity): _____

4. If you are having a meal(s) catered, please inform the caterer that the Barn Conference Center does not have food warming equipment other than a microwave. Please check what food service you are using.

Great Western Dining - HCC Campus

Private caterer - Name and Phone _____

Individual or organization providing own food _____

5. If you need IT assistance for any activity, please submit a Track-It via the web OR by sending an email to the HCC Help-Desk at helpdesk@highlandcc.edu at least ONE WEEK prior to the activity. Requests received with less than a week's notice are not guaranteed completion.

6. Maintenance Assistance Requested: (tables, seating, PA System, AV equipment, portable toilets, etc.)

7. Date request submitted: ____/____/____

Will alcohol be served? YES NO

Serving alcohol requires pre-approval by the HCC Board of Trustees.

8. Submitted by: _____

If yes, forward form to sahern@highlandcc.edu for approval by the Board at their next meeting (held monthly).

NOTICE: Highland Community College is committed to a policy of nondiscrimination in admissions, educational programs or activities and employment, as specified by federal and state laws and regulations.

For office use only
Board approval given?
Date of action:

Part II: To be completed by the President's office.

Date request received: ____/____/____

Action Taken: ____ Approved ____ Not Approved: Reason _____
(If not approved, notify requester immediately)

Cost to College: _____

Charge to Organization: _____

Signed: _____

Date: _____

Send copy to:

Vince Bowhay Marketing Eric Ketchum Eric Ingmire Andrew Gutschenritter

___ Rick Blevins ___ Lindsey Koch

Also send copies to appropriate personnel listed below and to the person who submitted the request.

Jerre Cole (All athletic events) IT Dept Cafeteria Manager

Other: _____