



Adikameg Hall Use Request

Date of Request: _____

Name of Organization: _____

Name of Responsible Person(s): _____

Contact Info: _____

Type of Event:

Date of Event: _____ Approximate No. _____

of Guests:

Time: _____ until _____

Use of Equipment Requested:

- Kitchen/Cafeteria
- Computer/Projector
- Sound System/Microphones

There is no fee for organizational use of Adikameg Hall. It is the users responsibility to follow all provisions included in the **Adikameg Hall Use Agreement** (attached). Failure to comply with the provisions set forth by Bay Mills Community College may result in the fees being assessed to the organization or department for the cost incurred by BMCC.

Signature of Authorized Representative

Read and agree to Policy Use Agreement

By signing this document, the authorized representative agrees that he/she has read, understood, and will adhere to the Adikameg Hall Policy Use Agreement.

BMCC Representative

- Approved
- Not Approved

Date: _____