De La Salle-College of Saint Benilde
Center for Partnership Advancement

VENUE RESERVATION FORM

VRF No. _____
Date: _____

We are pleased to submit below for your review, the venue and rental cost, as indicated in your letter attached hereto (Annex A). Should you wish to conduct a site inspection, please coordinate with us.

GENERAL INFORMATION	
Requestor/Company:	
Address:	
Contact Person:	
Contact Details:	

ACTIVITY/EVENT INFORMATION			
Venue:			
Purpose:			
	Dates	Date	Date
Date of activity:			
Time:			
No. of hours per day:			
Total no. of hours	Number of Participants		

Description	Rate /hr	Total Hour/s	Cost (PhP) per line
TOTAL (PhP) after discount			0.00

Please sign in the space provided below and return to us within 3 working days from the receipt of this form. By signing in this form, you acknowledge that usage of this space is governed by the College's internal rules and regulations and the attached guidelines (Annex B), and may be revoked or altered as the College deems for its own purpose.

THIS VENUE RESERVATION FORM IS SUBJECT TO CPA FINAL APPROVAL.

Once approved, please facilitate payment to our Finance Office, located at 2nd floor, Duerr Building, Taft Campus. Kindly provide us with a copy of OR as proof of payment.

Prepared by:	Approved by:	Accepted by:
Ms. Nena Portillo Checked by: LSU	Ms. Kathrine Biason *CPA Director* Date:	_____ *Authorized Representative* Date:

ANNEX B (VENUE RESERVATION GUIDELINES)

a. Reservation would be based on the following level of prioritization: 1st curricular, 2nd non-curricular 3rd extracurricular.
b. All programs of activities must strictly conform to existing rules and regulations of the College
c. Authorized representatives of the concerned party with the approved reservation form should coordinate with the Office of the Vice President (OVPA) prior to the event/set-up date.
d. No air-conditioner shall be provided in the Theater during set-up. However, industrial fans or air cooler units will be provided.
e. Major events require pre-production meetings with OVPA or CTO.
f. In case of suspension of school operations, scheduled activities are automatically canceled. Kindly coordinate or check with OVPA.
g. Posting of materials using nails, thumbtacks, push pins, clear tape, duct tape, double sided/ mounting tape, and other damaging objects or materials on walls/facility is not allowed.
h. The principal signatory and/or organization shall be held liable for any loss/damage to any equipment and/or facility and will shoulder the cost of any repair and replacement of the damaged facility/material.
i. Eating and drinking are not allowed inside the following venues: ARG Theater, Auditorium, Dance Room, DAC Theater, Ideation Hall, and Black Box.
j. The cleanliness and orderliness of the venue should always be observed.
k. Proper waste disposal is the responsibility of the event organizer. Food waste should be brought out by the event organizer's caterer for proper disposal.
l. All function rooms are strictly for meetings and seminars only.
m. The set-up must be removed right after the activity. Unclaimed materials/props after twenty-four (24) hours will be disposed of accordingly by OVPA.
n. Set-up and campus entry for Sundays and Holidays are subject to the approval of the Vice-President for Administration.
o. All audio-visual equipment should be requested from the Center for Learning Resource except for DAC Theater and Black Box reservations through the OVPA.
p. The requestor must provide a list of needed materials and items.
q. The OVPA reserves the right to cancel anyapproved and scheduled activity to give way to college-initiated activity or for non-compliance with the guideline.
r. Single-use plastic is not allowed in the campus.
s. The requestor/organization shall be responsible for its guests/participants thoughout the event.

By signing below, I acknowledge that I fully read and understood the guideline. I understand that if I have any questions or concerns, it is my responsibility to discuss this with OVPA. Any alterations not originally reflected in this document shall not be recognized nor considered.

_____

Authorized Representative/Requestor
Signature over printed name
Date: _____