December 14, 2015

Customer Name Attn: Contact Name Customer Address City, State Zip Code

Dear Ms./Mr. Name:

I am pleased to learn that the **Event Name** scheduled on **Event Date**, at the **Angelo State University campus** has been approved and your date is being held. However, final confirmation of your date will be made only after we receive a signed copy of the Facilities Use Agreement and Addendum, Waiver and Liability Release, Liability Insurance Certificate including clause for Sexual Abuse and Molestation coverage, verification of camp compliance with Senate Bill 1414, and your non-refundable deposit of \$0.00. If these documents are not received in our office by **Due Date**, this date will again be made open.

As a point of information, invoicing of the total facility rental fee and any other charges/fees will be processed after the completion of the event. NOTE: Additional technical and special equipment/personnel will generate charges that will be added to the facility rental fee. All charges are estimates until final meeting with the Events Manager or the completion of the event. Charges for additional services requested at the time of the event will also be included in the billing. Any and all catering, lodging, and facility use charges will be billed together on a consolidated invoice following the completion of your camp.

Please note that a guarantee must be provided 10 business days in advance. All food service billing will be based on this guarantee.

Once your deposit is received and your event is confirmed, it will be necessary for us to have additional information concerning your program. Those items pertaining to physical arrangements such as equipment needs and table and chair requirements should be discussed with an Events Manager. They can be reached at (325) 942-2021. Any arrangements pertaining to food, refreshments and/or concessions for your program, should be discussed with, the Chartwells Catering Director. He can be reached at (325) 942-2124.

Events involving alcohol are extraordinary. However, specific permission for alcohol service may be obtained through the Director of Business Services. Customers who desire alcohol service MUST contact the reservations team and set an appointment to start the application process no later than 30 days prior to their event.

<u>Unless prior arrangements are made with the Special Events Office, collection of registration fees, donations, or any type of monies is not allowed on the campus grounds.</u> Therefore, all fees or donations will need to be collected prior to coming on the <u>Angelo State University campus or lake grounds.</u>

If busses are to be used as transportation by your organization to the campus, please contact the University Police Office, (325) 942-2071, for a map of areas where unloading and parking are allowed. If you have any questions regarding this, please feel free to call at any time.

We are looking forward to working with you on this program. If you have any questions at all, please call the reservations team at (325) 942-2021.

Sincerely,

Jessica Manning Director of Business Services

ANGELO STATE UNIVERSITY

Disability and Special Needs Accommodations

Customer is required to provide 72 hours advance notice if anyone attending this event has a disability and/or requires any special accommodations. Thank you in advance for your cooperation and understanding.

I have acknowledged my responsibility to provide 72 hours advance notice of any special needs or accommodations that are required for this event.

Waiver and Liability Release

In consideration of the Permission granted by Angelo State University to Customer Name for the use of the Angelo State University Campus on the date(s) specified on the Request Form for Use of University Facilities by Outside Groups, (Event Date), successors, employees, and agents, hereby release, discharge, hold harmless, and agree to indemnify Angelo State University, and all of their officers, agents, and employees from any and all liability (hereinafter "the released parties"), including third party claims, arising from or in connection with operation or participating in the above-described activity, regardless of whether such liability is caused by the negligence of the persons or entities named above or the released parties, further Customer Name agrees to correct and/or compensate Angelo State University for any damages that might occur during this activity.

Date	Representative Customer Name Contact Name	

ANGELO STATE UNIVERSITY FACILITIES USE AGREEMENT

Lessee Contact Information

Name/Contact:	
Company/Organization:	
Department:	
Phone:	Fax:
additional coverages may be required based on tinclude a Waiver of Subrogation. A certificate of i	y Insurance coverage of \$1,000,000/\$2,000,000 aggregate as a minimum, and the event. ASU shall be named as an Additional Insured and all policies will insurance demonstrating the aforementioned requirements and the stipulated ith a completed copy of this agreement to the Special Events Office.
I have acknowledged my responsibility to purchase	/provide liability insurance:
	Customer Initial Event Information
Event Name:	
	Event Time (s):
	Facility and Fees
Building: Angelo State University	Room:
	ervation Office: Special Events Facilities/Services
Fees: Base Rental Charges	(attach itemization or waiver request, if applicable)
Custodial/Labor/Electrical Surcharge	
Liability Insurance	
Total Rental Amount Due:	\$ Due by: 30 days after receipt of invoice
(This price does not include additional	services requested. These fees will be assessed after the event.)
NON-REFUNDABLE Deposit Required:	\$_\\$0.00 Required before reservation can be confirmed)
Form of Payment:	♦ Money Order ♦ Cash ♦ Personal Check
future use of any Angelo State University ("University") fa safety and welfare of participants, including but not limite parking areas, or on any University property. This agriliabilities and claims for damages and/or suits for or by whatsoever, whether in or upon premises or any part the premises or any activity carried on by the lessee in codischarge and/or indemnify, defend and hold the University volunteers, and employees, harmless from any and a proceedings, damages or liabilities, including attorney's losses however occurring or damages growing out of the lessee agrees to comply with all laws, ordinances, and reto be responsible for payment of federal, state, or local ta such entertainment activity. The lessee shall not cause of	ad herein. Failure to pay fees by the due date shall result in limitations or restrictions or acility by the lessee. The lessee is solely responsible for the activities, supervision, and ed to times when participants are in University common areas, restrooms, classrooms element is made upon the express condition that the University shall be free from all by reason of any injury or injuries to any person or persons or property of any kind thereof during the term of this Agreement, or occasioned by any occupancy or use of onnection therewith, and the lessee hereby covenants and agrees to release, foreverersity, the Texas Tech University System, its components, regents, officers, agents all claims, losses, suits, demands, causes of action of whatever kind and nature fees, on account of or by reason of any such injuries, death, liabilities, claims, suits, or same; whether or not caused by the negligence, act, or omission of the University. The squalations applicable to the intended use and occupancy. In addition, the lessee agrees axes, which may be levied against the entertainment being presented or on admission to or permit anything to be done to mar, deface, or otherwise render the facilities unusable in as the commencement of occupancy, except for ordinary wear and use.
Lessee Signature	Date
Director of Business Services	Date

ANGELO STATE UNIVERSITY FACILITIES USE AGREEMENT CAMPS AND CONFERENCES ADDENDUM

We have received your request for a summer camp/conference on the Angelo State University campus. Your requested date(s) have been placed on HOLD. In order to confirm your reservation, we require each of the following:

	Signed Facilities Use Agreement, Letter & Waiver, and Addendum			
	Non-Refundable Deposit in the amount of \$0.00 (per the Camp & Conference Request Form you submitted			
	Liability Insurance Certificate including clause fo	r Sexual Abuse and Molestation coverage		
	Insurance Coverage Requirements:			
	 Commercial General Liability Coverage at minimum of \$1,000,000 Commercial Automotive Liability Coverage at minimum of \$1,000,000 [Please note, this requirement is only necessary for camps bringing their own vehicles on campus (ie. Church owned vans that will be operated on campus). This does not apply to privately owned individual vehicles transporting campers to and from campus.] Certificate naming ASU as "Additional Insured" Includes a waiver of subrogation clause in favor of ASU Demonstrates proof of Sexual Abuse and Molestation coverage at minimum of \$1,000,000 Tax Exempt (Please initial yes or no) 			
	NO YES (Please pro	ovide a copy of Tax Exempt form)		
	Understanding that Food Services will be billed by	pased on guarantee provided 10 business days prior to		
	event date (Custome	r's Initials)		
	Verification of Camp Compliance with Senate Bil	Il 1414, which amended Texas Education Code, Section		
	51.976, requiring that all staff in a position involving contact with campers successfully complete an			
	approved training and examination program on s	sexual abuse and child molestation		
	 Camp Director must certify that all personnel have received training in sexual abuse/child molestation prevention pursuant to Texas Education Code, 51.976, prior to any camp in which minors will participate. Camp Director must maintain on file and present upon request documentation that verifies that all staff in a position involving contact with campers at a campus program for minors have within the preceding two years successfully completed an approved training and examination program on sexual abuse and child molestation. By signing below, Camp Director acknowledges responsibility to ensure camp compliance with Senate Bill 1414, which amended Texas Education Code, Section 51.976. 			
	Camp Director Printed Name	Camp Director Signature Date		
reserva	e acknowledged my responsibility to provide the iter	ms required herein prior to confirmation of my event at least ten (10) business days prior to the event date may result		
Lesse	ee Signature	Date		
Directo	tor of Business Services	Date		