Student Union, Inc. Event Services One Washington Square San Jose, CA 95192-0155 408-924-6300 | student-union-events@sjsu.edu

SRAC Reservation Request Form

Washington Square lose, CA 95192-0155

Location/Room Requested	- Activity Start: : : : : : : : : : : : : : : : : : :		PM PM PM PM
Main Contact:			
Billing Address: State Zin Code			
City State Zip Code	Email Address:		
Please describe your activity:			- -
Are there any equipment needs?			-
SRAC Agreement Rule	es & Guidelines		_
In order to create a quality event experience for all users, please a • In lieu of photo Tower ID or member Card, members may use the • All bikes, skateboards, and scooters are not allowed within the face • SRAC is not responsible for lost or stolen items. It is recommende • Food is not allowed in any activity space including but not limited • Spartan Recreation will not supply referees and/or fitness instructe • Any violation of policies and procedures will result in disciplinary the SRAC professional staff. To discuss the specifics of facility reservation request, the individual positions at least 5 days prior to the requested activity date. Request	biometric hand reader bility for any reason. Ed to lock your belongings securely in a late 3-court gym, MAC gym, and fitnes for any activity in the facility. The consequence of your action making request is required to meet with	s studios. ons will be determined the SRAC managem	
Use of music on campus for events and programs must comply with S SESAC, and Global Music through their respective websites: <u>BMI.co</u>			
Client agrees to indemnify, defend, and hold harmless the Student Ustate University, the Trustees of California State University and the from any and all liability, claim, loss, cost or obligation on account persons or to property from whatever cause where such injury, deat services scheduled.	e State of California, their officers, ager of or arising out of any injury, death th or damage is connected with the ev	nts and employees or damage to cent, use or	_
I, on behalf of, and as an authorized agent of the above named of Jose State University and the Student Union, Inc. regarding the policies regarding fees, cancellations and no shows.		-	
Print Name: Signature:	1	Date	
Approving Office Signature:]	Date	