

NORTHWEST MISSISSIPPI COMMUNITY COLLEGE
MULTIPURPOSE LIVESTOCK FACILITY ACTIVITY REQUEST FORM

All groups and individuals wishing to hold an event at the facility must complete this form and mail to the Manager of the Multipurpose Livestock Facility, Northwest Mississippi Community College, 4975 Highway 51 North, PO Box 7020, Senatobia, MS 38668; or, submit electronically to swilliams@northwestms.edu. Inquiries should be directed to (662) 562-3361.

WARNING: UNDER MISSISSIPPI LAW, AN EQUINE ACTIVITY OR EQUINE SPONSOR IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES, PURSUANT TO THIS ACT.

Event _____ Sponsor _____

Facilities Required (arena, lobby, concession stand, etc.): _____

Rehearsal Date(s) _____ Time In _____ Time Out _____

Activity Date(s) _____ Time In _____ Time Out _____

Actual Event Start and End Times: _____

MULTIPURPOSE FACILITY MANAGER APPROVAL _____

FACILITY ARRANGEMENTS AND EQUIPMENT NEEDS:

Number of tables _____ Number of chairs _____ Please describe tables & chairs arrangement and additional equipment, if needed _____

DO YOU NEED POLICE SERVICE? _____ **Contact Campus Police at 662-562-3314 to make arrangements.**
(Northwest may determine your event requires officers and you will be notified of charges and billed accordingly.)

CONCESSIONS/FOOD SERVICE ARRANGEMENTS _____

Estimated Attendance _____ Admission Charge _____

Chaperones (if student organization) 1. _____ 2. _____

Northwest is not liable for any injury or accident that may occur. Damage to the facility is the responsibility of the organization or person(s) shown below. Activity regulations are listed in the Northwest Bulletin and may also be found at northwestms.edu. Northwest facilities and grounds are **Smoke-Free**. The sponsoring organization is responsible for ensuring compliance with all campus, local, state, and federal rules and laws.

Responsible Party: (Please sign and date)

Name (print) _____ Signature _____

Address _____ Phone _____

Email _____ Date: _____

FOR COMMITTEE USE ONLY

Approval: Yes _____ No _____ Yes, with exceptions _____

Exceptions: _____

Signature of Committee Chairman _____

Rental Fee: _____ Damage/Clean-Up Deposit: _____

Other Fees: (specify): _____

NOTE: All fees and deposits should be paid in advance at the NWCC Business Office, McCormick Administration Building.

NWCC: Calendar of Events Description

Contact Person: _____

Phone: _____

Short Description of Event: _____

Revised August 2018

Farm Arena