



## UNITED STATES MERCHANT MARINE ACADEMY FACILITIES USE REQUEST FORM

Please read through all attachments before completing and submitting this Facility Use Request Form. Submission of this form does not constitute approval. You will be notified as to whether your request is approved and, if it is, a permit will be issued. All requests should be submitted three weeks in advance.

<b>SECTION 1: EVENT INFORMATION – TO BE COMPLETED BY APPLICANT</b>	
Name, address, email and telephone number of requesting individual/entity:	
Nature of your event:	
Affiliation if any, with the Academy:	<input type="checkbox"/> Faculty/Staff <input type="checkbox"/> Midshipman <input type="checkbox"/> Alumnus <input type="checkbox"/> Other (please describe): _____
For entities, profit or not-for-profit:	
Date of Event:	
Time of event, including time for set-up and clean-up:	Set-up start time: _____ Event start time: _____ Event end time: _____ Clean-up end time: _____
Facility requested:  <b>Note:</b> The Academy does not provide catering, chairs, tables, table linens, or tableware in any of its facilities.	<input type="checkbox"/> Chapel  <input type="checkbox"/> Land Hall  <input type="checkbox"/> Lower Roosevelt Field  <input type="checkbox"/> O'Hara Gym <input type="checkbox"/> Locker rooms <input type="checkbox"/> Scoreboard <input type="checkbox"/> Sound system  <input type="checkbox"/> Pool (Lifeguard required): <input type="checkbox"/> Locker rooms



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	<input type="checkbox"/> Tomb Field <input type="checkbox"/> Locker rooms <input type="checkbox"/> Press box <input type="checkbox"/> Scoreboard <input type="checkbox"/> Sound system  <input type="checkbox"/> Yocum Sailing Center  <input type="checkbox"/> Other: _____
Vendors (if applicable, i.e. Caterer, DJ, etc.) <b>Note:</b> All vendors must meet attached insurance requirements	
Anticipated attendance: _____	<input type="checkbox"/> Non-athletic event: _____  <input type="checkbox"/> Athletic event: <input type="checkbox"/> Number of teams participating: _____ <input type="checkbox"/> Number of games: _____ <input type="checkbox"/> Expected number of spectators: _____ <input type="checkbox"/> Athletic trainer at event: <input type="checkbox"/> No <input type="checkbox"/> Yes
Fee, if any, for participants/attendees:	<input type="checkbox"/> No <input type="checkbox"/> Yes (if so, describe)
Food and/or alcohol, if any, to be served:	Food: <input type="checkbox"/> No <input type="checkbox"/> Yes  Alcohol: <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, must follow attached Academy policy and obtain a special event license from the NYS Liquor Authority):
<b>SECTION 2: TO BE COMPLETED BY THE ACADEMY</b>	
Date Received:	
Availability of Requested Facility	Facility Manager: _____ <input type="checkbox"/> No <input type="checkbox"/> Yes  DPS Notified: _____ <input type="checkbox"/> No <input type="checkbox"/> Yes
Other events, if any, scheduled for the same facility or different facility on the same day:	<input type="checkbox"/> No <input type="checkbox"/> Yes (if so, describe)
Academy POC:	



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<b>SECTION 3: REVIEW / APPROVAL</b>	
<b>Deputy Superintendent:</b>	<input type="checkbox"/> Approve <input type="checkbox"/> Approve with comments <input type="checkbox"/> Disapprove
Comments:	
Signature/Date:	
<b>SECTION 4: REVIEW / CONCURRENCE</b>	
<b>Counsel to the Academy:</b>	<input type="checkbox"/> Concur <input type="checkbox"/> Concur with comments <input type="checkbox"/> Non-Concur
Comments:	
Signature/Date:	

**ATTACHMENTS:**

**Facility Use Policy (SI 2016-01)**

**Policy on Alcohol Consumption on Academy Grounds (SI 2023-06)**

**Insurance Requirements**



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### **INSURANCE REQUIREMENTS:**

All individual or entities seeking to use Academy facilities must submit a certificate of insurance evidencing comprehensive general liability insurance in the amount of \$1 million combined single limit for bodily injury and property damage per occurrence for the period of the proposed event.

All certificates of insurance must name both the Academy and the United States of America as additional insureds/certificate holders. In addition, all certificates of insurance must be reviewed and approved by Counsel to the Academy before an event can be approved.