## THE UNIVERSITY OF ALABAMA OFFICE OF GROUNDS USE PERMITS APPLICATION FOR USE OF CAMPUS GROUNDS

Phone No.:					
E-mail:					
	Zip:				
Representing (Name of UA Org. or Dept.):					
Office/Position Held in Org./Dept.:					
UNIVERSITY ACCOUNT NUMBER (FOAPAL):					
CAMPUS GROUNDS REQUESTED:  (Attach a campus map if necessary. If event is on the Quad, please specify which section.)  *At NO TIME will unauthorized vehicles be allowed on the Quad for any reason.					
•	ason.				
ur event? Your event by a paren	<b>Yes No</b> at, guardian, or teacher?				
- From:_ east a 3-5 busin	To: ness day notice for the event t				
If this is a recurring event, please list the other dates and times:					
- From:	To: To: To:				
Yes No					
	Yes No				
	UCTURES?				

9.	Will there be FOOD? Yes No  (if yes, please describe what will be served)  Will the food be sold or given away during the event?  Will the food be store-bought, home cooked, or catered?  Caterer:					
10.	Will there be <b>ALCOHOL</b>	at this event? Yes	No	Provider:		
11.	<b>HEALTH &amp; SAFETY STANDARDS/LIABILITY</b> : I understand that this event must meet all health and safety requirements of the University, City and County of Tuscaloosa, and State of Alabama an to ensure conformity with all such requirements.					
	I further agree to take full responsibility to manage this event in such a way as to comply fully with UA's policy relating to the Use of University Space, Facilities & Grounds; the General Terms and Conditions; and all other relevant University policies and procedures.					
	I agree to remove all trash and other items associated with this event, and to return the grounds to precondition. In the event that I fail to return the grounds to pre-event conditions, the University will as the reasonable costs of labor (at a minimum of four (4) hours per person performing the labor), dam clean-up, and repairs. For University organizations and departments, such reasonable costs will be asset the University Account number provided above. For individual faculty and staff members, the University provide me an invoice itemizing the amount I owe, and I agree to be personally responsible for the amounts set forth in the invoice. If I fail to pay the invoice within seven (7) days of the University is it to me, I authorize the amount of the invoice to be satisfied by payroll deduction (including a lump steeduction) and by any other method allowed by law.					
	Applicant Signature:			Date:		
	Depending on the type of event proposed, there may be other forms or steps in addition to this one and other offices to contact before the event can be considered for approval. For example, a Work Order may need to be submitted if a need for grounds work or similar is requested. If you are a student organization, you will need to register your event with The SOURCE utilizing the Student Event Planning Form.					
	* Should you have questions, please refer to UA's Grounds Use Permit Website <a href="https://uafacilities.ua.edu/grounds-use-permit/">https://uafacilities.ua.edu/grounds-use-permit/</a>					
	* Please submit your completed application by using the submit button or email to:  1205 14th Street • Box 870294 • Tuscaloosa, AL 35487  groundspermits@ua.edu • 205-348-6777					
	Office Use Only:					
	Approved:	Date		Confirmation Sent:		