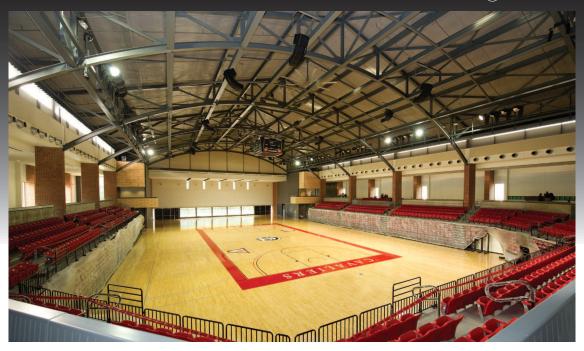




GENERAL EVENTS AGREEMENT 2011-2012

Information and Conditions

1 College Avenue Wise, Virginia 24293 For more information, contact Chris Davis at: Box Office: 276-376-3431 Office: 276-376-4505 Cell: 276-275-4686 E-mail: cdd3s@uvawise.edu



1 College Ave., Wise, VA 24293 www.uvawise.edu/ Chris Davis | 276-376-4505 phone | 276-328-0269 fax | cdd3s@uvawise.edu

GROUP RESPONSIBILITIES

The sponsoring party/group leader(s) assumes full responsibility for the actions of the group members using College facilities and is/are financially responsible for any and all damages to facilities during the group's stay. Groups are expected to abide by all federal, state and local laws and ordinances which may now or hereafter be enacted during the contract period.

.INSURANCE/LIABILITY COVERAGE

ALL individuals/groups/events MUST provide a valid Certificate of Insurance (COI) naming the College as an additional insured with their signed contract. The general liability insurance coverage maintained by the group shall include, but not be limited to, the following: Premises-Operations (leased premises) and Contractual Liability with minimum amounts of: bodily injury per person - \$1,000,000 and property damage per accident - \$1,000,000. The following is the proper name to be listed as additional insured: The Commonwealth of Virginia, and the Rector and Visitors of the University of Virginia, its divisions, its officers, employees, and agents.

Additionally, all general events utilizing outside caterers (that have been exempted from using Chartwell's Dining Services) or that are preauthorized and licensed to serve alcohol during their event MUST provide a valid Certificate of Insurance (COI) naming the College as an additional insured with their signed contract. The group leader/contact should ask his/her personal homeowner's insurance agent to issue a one-day or event COI. Groups using an outside caterer may provide the caterer's COI with their signed contract also listing the above as an additional insured.

DEPOSIT

All events require a 50% non-refundable deposit based upon the total estimated event cost to be submitted with contract at time of reservation. Any and all changes in numbers must be provided one (1) week PRIOR to the event date, otherwise billing is based upon original numbers provided. Any changes after this date cannot be guaranteed and will incur a \$50 late request fee if the change(s) request can be accommodated.

PAYMENT OF FINAL BALANCE

All events will receive an invoice for the full remaining balance from the original contract plus any additional charges (i.e. damages, extra setup, etc) incurred during the event. Payment in full is due NET 30 (i.e. due within 30 days) upon receipt of the invoice.

CATERING

Chartwell's Dining Services has been contracted by UVa-Wise to provide catering to all groups that utilize facilities on our campus. They can meet the catering needs of your event whether it is small and informal, large and formal events, or somewhere in between. They can work with you to provide a variety of menu and service suggestions. All groups must use Chartwell's Dining Services for their catering needs unless a representative from Chartwell's Dining Services releases the group from this binding agreement. In the event that you would like your event to be exempted from using Chartwell's catering, it is your responsibility to contact Chartwell's to initiate the exemption process, which includes completion of the Catering Exemption Request (form is attached).

TOBACCO/SMOKING

The University of Virginia's College at Wise is dedicated to providing a healthy, comfortable, and productive learning environment for faculty, staff and students. Smoking and/or the use of other tobacco forms pose a significant health risk to individual members of the campus community. All members of the campus community are responsible for abiding by the smoking policy outlined below.

The College prohibits smoking in all campus buildings, residence halls, seating areas/stands of outdoor athletic facilities, and pool vehicles. Smoking will also be prohibited within 25 feet of entrances to campus buildings and the seating areas/stands of outdoor athletic facilities.

2012 GENERAL EVENTS CONTRACT

| GENERAL INFORMATION GROUP NAMENUMBER IN GROUP | | | | | |
|--|-------------------------|--|----------------------------------|-----|---|
| EVENT TYPE | | | | | |
| BILLING ADDRESS Street Address / Post Office Box Cit | y State Zip | | | | _ |
| GROUP CONTACT – Any of the honored. | | | _ | | |
| Leader 1 | | <u>E</u> | -mail | | |
| Contact numbers | W; | Cell; | H; | FAX | |
| Leader 2 | | E | -mail | | |
| Contact numbers | W; | Cell; | H; | FAX | |
| Concourse \$500 | irs - : | quantity x \$ | | | |
| TABLES 60" round -: | | quantity x \$ ' quantity x \$ ' | 7.00 each = \$ | | |
| 8' rectangle - : (Chairs & Tables are incl | uded in initial set-u | quantity x \$ ' p, charges incurred o | 7.00 each = \$ n added items) | | |
| STAGE small (8'x16') \$50.0 medium (12'x24') \$ large (16'x32') \$150 | 100.00 | | = \$_ = \$_ = \$_ | | |
| SOUND SYSTEM \$300.00 | | | = \$ | | |
| Total estimated costs Non-refundable Deposit Remaining Balance (due | | | = \$ rvation) = \$ = \$ | | |
| Group Leader Signature I understand and agree to abi numbers provided unless I pr applicable, Certificate of Insur Signature | ovide changes one (1) w | veek prior to our arrival. | | | |

FEE SUMMARY / DEPOSIT CALCULATION FORM GENERAL EVENTS CONTRACT

| GENERALEVENTSET - UPDIA Please provide the staff of the Convocation Center with the turn it with your completed event contract. If you need assistance, please contact Chris Davis at 276 Please use a separate diagram for each location/set-up Group Name Group Leader Set-up diagram below is for Total number of chairs Total number of diagrams being submitted with your content of the content | ne specific set-up details of your enderson of specific set-up details of your enderson of of your en | event in the place below a du. | Cell |
|---|--|--------------------------------|------|
| Please provide the staff of the Convocation Center with the turn it with your completed event contract. If you need assistance, please contact Chris Davis at 276 Please use a separate diagram for each location/set-up Roup Name Broup Name Broup Leader Set-up diagram below is for | ne specific set-up details of your enderson of specific set-up details of your enderson of of your en | du. H ; | Cell |
| Please provide the staff of the Convocation Center with the turn it with your completed event contract. Tyou need assistance, please contact Chris Davis at 276 Please use a separate diagram for each location/set-up Froup Name Froup Leader Set-up diagram below is for | ne specific set-up details of your enderson of specific set-up details of your enderson of of your en | du. H ; | Cell |
| eturn it with your completed event contract. you need assistance, please contact Chris Davis at 276 Please use a separate diagram for each location/set-up Group Name Group Leader et-up diagram below is for otal number of chairs otal number of diagrams being submitted with your cont | 6-376-4505 or cdd3s@uvawise.ed b.**Event Date Leader numbers (at /type of tables (i.e. 12/round; 3/re | du. H ; | Cell |
| you need assistance, please contact Chris Davis at 276 Please use a separate diagram for each location/set-up froup Name Group Leader et-up diagram below is for otal number of chairs otal number of diagrams being submitted with your cont | o.**Event DateLeader numbers (ettype of tables (i.e. 12/round; 3/re | н ; | |
| * Please use a separate diagram for each location/set-up Group Name Group Leader Set-up diagram below is for Total number of chairs Total number Total number of diagrams being submitted with your cont | o.**Event DateLeader numbers (ettype of tables (i.e. 12/round; 3/re | н ; | |
| Group Name | Event Date Leader numbers (at /type of tables (i.e. 12/round; 3/re | | |
| Group Leader | Leader numbers (Leader | | |
| Set-up diagram below is fora Total number of chairs Total number Total number of diagrams being submitted with your cont | at r/type of tables (i.e. 12/round; 3/re | | |
| otal number of diagrams being submitted with your cont | rat/type of tables (i.e. 12/round; 3/reract | ectangle) | |
| otal number of diagrams being submitted with your cont | ract | your groy | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | \ |
| | | | 1 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

CHARTWELL'S DINING SERVICES CATERING EXEMPTION REQUEST

Chartwell's Dining Services has been contracted by The University of Virginia's College at Wise to provide catering to all groups that utilize facilities on our campus. All groups must use Chartwell's Dining Services for their catering needs unless a representative from Chartwell's Dining Services releases the group from this binding agreement.

In the event that you would like your event to be exempted from using Chartwell's catering, it is your responsibility to contact Chartwell's to initiate the exemption process, which includes completion of this Catering Exemption Request. If your event is exempted from Chartwell's catering, a copy of your signed Catering Exemption Request must be provided to the Convocation Center staff. Chartwell's Dining Services may be reached at 276-328-5514 or chartwells@uvawise.edu to discuss your catering needs.

| Group Name | Date of Event |
|--|---|
| Contact Person | |
| Explanation | |
| | |
| | |
| | |
| ~ ~ ~ | |
| The contact person listed above has met w group/event from utilizing catering services | ith me to discuss their catering needs. I have released their with Chartwell's Dining Services. |
| Chartwell's Comments | |
| | |
| | |
| | |
| Chartwell's Representative Signature | Date |

*** This completed form must be returned with your UVa-Wise Convocation Center General Events Contract. ***