



External Event/ Space Request

Contact Name: _____ Organization: _____

Phone: _____ Email: _____ Address: _____

Type of Organization:

- Non-Profit Organization (budget size : _____) Government Agency
- Public School Corporation Other _____

ABOUT YOUR EVENT

Name: _____ Description: _____

Date of Event: _____ Alternate Date: _____

Setup Time: _____ Event Start Time: _____ Event End Time: _____

Estimated # of people in attendance: _____

Campus: Bronx (463 East 149th Street) **MCNY No Longer Rents Space at the Manhattan Campus**

Space Requested: Please describe your space needs and any special setup required

Please check all that apply:

- Food/refreshments served (not provided by MCNY)
- Technology needs (mic, projector, computer etc...) Describe: _____
- There will be children under 18 in attendance - With their parents Without parents
(Special approval required – may require additional insurance)
- Open to the public Open just to our guests
- Event will be advertised - Flyers Online Social Media Invitations Other: _____
- Classroom space rentals require special approval**

- I have read and reviewed MCNY’s rental policies.
- I acknowledge that a Certificate of Insurance (COI) is required for this event.

- 1) Complete and submit request form and send to jedwards@mcny.edu for Bronx Space Request.
- 2) We’ll review and respond within 72 hours.
- 3) If available, we will confirm and calendar your event, and send a rental agreement.

Internal Use Only:	
<input type="checkbox"/> Approved <input type="checkbox"/> Denied Registrar Confirmed: <input type="checkbox"/> Yes <input type="checkbox"/> No	<div style="border: 1px solid black; padding: 5px;"> Certificate of Insurance (COI) reviewed by CFO: <input type="checkbox"/> Approved <input type="checkbox"/> Denied CFO Initial: _____ </div>