

INTERACTIVE

CAPITOL PUBLIC EVENT/EXHIBIT SCHEDULING FORM PLEASE PROVIDE THE FOLLOWING INFORMATION

Name of Event: _____ Expected Number in Attendance: _____

Brief Description of Event and/or Exhibit: _____

Name of Sponsoring Organization: _____

Main Contact Person: _____

Street Address: _____ E-Mail Address: _____

City, State and Zip: _____

Telephone Number: (____) _____ Fax Number: (____) _____

Back-Up Contact Person: _____

Street Address: _____ E-Mail Address: _____

City, State and Zip: _____

Telephone Number: (____) _____ Fax Number: (____) _____

EVENT		<i>Event dates are based on availability only.</i>		
Month	Day	Year	Start Time	End Time
			Set Up Time	Take Down Time
What area(s) are you requesting for your Event ?				
_____	Front East Steps and Walks			
_____	East Lawn, NORTH side		} East Lawn North or South side can be booked together.	
_____	East Lawn, SOUTH side			
_____	First Floor Rotunda (Glass Floor) <i>one-hour limit</i>			
_____	First Floor Corridor, NORTH		} Events booked in the North or South Corridor will be charged an additional \$500.00 basic use fee. The West Corridor is available at no charge and can be booked with the North OR South Corridor.	
_____	First Floor Corridor, SOUTH			
_____	First Floor Corridor, WEST			
EXHIBIT		<i>Exhibits may be scheduled for display up to 7 calendar days during a calendar year.</i>		
Exhibit: <i>(Beginning Date)</i>	Month	Day	Year	Start Time
Exhibit: <i>(Ending Date)</i>	Month	Day	Year	End Time
What area(s) are you requesting for your Exhibit ?				
_____	Room 53 (<i>Non-State Agency Exhibit</i>)		_____	Ground Floor Rotunda (<i>State Agency Exhibit</i>)

AUDIO

Are you planning to use the Public Address System? ____ Yes ____ No

If **yes**, what time will you be using the Public Address System? From _____ to _____

Will you need the D.J. or stereo (to play CDs) hooked up to the Public Address System? ____ Yes ____ No

Will you need an audio press feed device/mult box (*for the press to hook into*)? ____ Yes ____ No

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EXHIBITS

Is a clear layout scale drawing or sketch of the proposed exhibit attached? Yes No

Are the dimensions of the space required indicated on the drawing or sketch, as well as the manner in which the exhibit will be mounted or displayed? Yes No

FOOD AND BEVERAGES

Will food or beverages be served? (See page 4, Section G 1-4.)

Is the food being provided by a licensed caterer? Yes No Setup time? _____ (a.m. or p.m.)

If **yes**, please list name and phone number of caterer.

Caterer Name _____ Telephone Number (____) _____

Caterers are responsible for bringing all linens and skirting.

Will your caterer need a prep area? Yes No (There is no access to water on the first floor.)

Will the caterer need electric in their prep area? Yes No

Is a copy of the food license enclosed? Yes No

If **no**, when do you plan to submit a copy of the license to the CFO Events Coordinator? _____

Is your food being served by invitation only? Yes No

CANDLES (outside events only)

Are you planning on using candles during your event? Yes No (See page 26.)

If **yes**, please be aware that if wax is dropped on sidewalks and steps, you will be charged for the removal.

CANCELLATION

If your event is outside, will you cancel in case of rain or inclement weather? Yes No

TENTS, PORTABLE TOILETS AND EQUIPMENT

Do you desire to erect any tents, canopies, shelters or portable toilets? Yes No

Number of portable toilets? _____

Tent piers have been embedded in the lawn to accommodate the following tent sizes:

South side of lawn: 40- x 40-foot tent and 40- x 60-foot tent

North side of lawn: 30- x 30-foot tent and 30- x 60-foot tent

Remember: All canopies and shelters must be **freestanding**.

If renting a tent, it is recommended to also rent your table and chairs from the same tent rental company.

If **yes**, please list number, type, size, and description of all equipment _____

If snow needs to be removed from the Capitol grounds to set up a tent, you will be charged \$100.00.

Please list name and telephone number of the company supplying the tent/and or portable toilets.

Company Name _____ Telephone Number (____) _____

Do you desire to erect any equipment or props? Yes No

If **yes**, please list and give description _____

Any tables brought into the Capitol building should be 6 feet or less.

WATER

Will you need a hose and water (nonpotable) for your outside event? Yes No

BANNER

Are you planning to display a banner across the front steps? Yes No

If **yes**, you will be charged \$25.00 per banner.

The maximum length is 24 feet. The maximum width is 2 feet.

If your banner is larger, you **must** hold your banner.

We are unable to provide banner poles outside.

INTERACTIVE RATE SHEET

Will equipment or services be needed from the CFO? Yes No

If **yes**, which of the following equipment is needed:

EQUIPMENT	NO. AVAILABLE	CHARGE PER ITEM	NO. NEEDED	FOR OFFICE USE ONLY
Banner Poles, 11 feet x 8 feet <i>(inside use only)</i>	3 sets	20.00 per set		
Pipe and Drape <i>(for caterers' use)</i>	3 sets	20.00 per set		
Chair	150	1.00		
Coat Rack <i>(includes hangers)</i>	10	15.00		
Easel	12	<i>max. \$20 a wk.</i> 4.00		
Electricity <i>(120-volt plugs)</i>		15.00		
Electricity <i>(3-phase) outdoor use</i>		75.00		
Flag	1 National 1 State	2.50 per flag	<input type="checkbox"/> National <input type="checkbox"/> State	
Public Address System <i>(microphone and electric included)</i>	1	40.00		
Podium	1	30.00		
Microphones on Stands	3	10.00 each		
Table <i>(folding)</i>	3 - 6' x 18" 30 - 6' x 30"	<i>max. \$35 a wk.</i> 8.00	<input type="checkbox"/> - 6' x 18" <input type="checkbox"/> - 6' x 30"	
	12 - 30" round <i>(cocktail)</i>	12.00	<input type="checkbox"/> - 30" round <i>(cocktail)</i>	
Table coverings are for inside use only. Tablecloth <i>(Royal Blue)</i> 54" x 96"	10	5.00		
Table Skirt <i>(Royal Blue)</i>	10	14.00		
Fitted Tablecloth w/skirt <i>(for 30" x 72" table)</i>	12	14.00		
Tabletop Lectern	1	12.00		
Tent Setup Charge <i>(Inserting and removing eyelets in tent piers)</i>	<i>(See page 23)</i>	25.00		
Hose and Water (nonpotable)	1 each	10.00		
Trash Can <i>(If your outdoor event needs additional trash pickup, your event will be billed an extra \$25.00.)</i>	10	2.00	EQUIPMENT TOTAL	
BASIC USE FEE charged for all events scheduled in the North, South and West corridors inside the building - \$500.00				
WEEKDAY RATE <i>(Unless Specified by the Executive Director of the Capitol Committee)</i>		\$30.00 Per Hour - LABOR		
EVENINGS after 5:00 p.m. and WEEKEND RATE <i>(Calculated by Number of People Attending Your Event)</i>		\$50.00 Per Hour - LABOR		
HOLIDAY RATE <i>(Rate Determined by Executive Director of the Michigan Capitol Committee, Calculated by Number of People Attending Your Event)</i>				
CANCELLATION RATE <i>(If You Cancel Less than Fourteen Days Before the Scheduled Day of Your Event)</i>			\$100.00	
If you are a State agency, will you be inter-accounting your bill? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes , which Department/Agency should be billed? _____				
Payment in Full Must Be Received Before the Date of Your Rally or Event.			TOTAL	

The above rate will be charged per person for labor to erect, operate, and remove the public address system provided by the State. **In addition**, there will be a one-half hour labor charge prior to the event and a one-half hour labor charge after the event for setting up and taking down the public address system equipment.

Notes on the Public Address System

In the event of inclement weather (re: rain, snow, hail, mist, etc.), for safety reasons and to prevent damage to the equipment, the public address system will not be provided or will be removed if such weather occurs during the event. If the equipment can be sheltered under the portico (top of east steps), it will be moved to that location so the program can continue.

The system has the capability of more than one microphone and plays CDs. No equipment (i.e., band, additional mikes, etc.) can be hooked into the State Public Address System.

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I acknowledge that as sponsor of this event or exhibit:

I have read, understood, and will abide by the procedures governing the use of the public areas of the Capitol.

The sponsor is responsible for damages incurred as a result of the event or exhibit.

The sponsor will either restore or pay to have restored the area used for the event or exhibit.

The sponsor will indemnify and hold harmless the State of Michigan for damage or loss to the State arising out of the sponsor using the Capitol or the Capitol grounds.

I understand that an event held for the primary purpose of advancing or advocating the political candidacies of a particular party or group, or advancing, advocating or opposing initiatives, referendums, pending House and/or Senate legislation, is not allowed in any of the public areas inside the Capitol. Further, I understand that if, during the course of the event, the CFO Director and/or Assistant CFO Director finds it to be in violation of these rules, they reserve the right to immediately terminate my event and I will not be eligible for a refund.

HOUSE AND SENATE ALLOTMENTS

Legislators with offices in the House and Senate buildings are responsible to pay for their events. Events cannot be paid from House and Senate allotments for events in the public areas of the Capitol.

CAPITOL SECURITY

The State Capitol building and grounds are patrolled by the Michigan State Police Capitol Security Section. For information or concerns regarding security for your event please contact:

F/Lt. Brody Boucher at boucherb@michigan.gov



Signature of Sponsor _____ Date _____
(A signature is required before an event will be scheduled)

Name (Printed or Typed) _____

Address and Phone Number
(if different from Contact Person) _____

After the Capitol Public Event/Exhibit Scheduling Form has been returned with a signature, you will receive a confirmation letter and bill for your event/exhibit from the CFO Events Coordinator. Payment must be received before the date of your event or rally.

Barb Thumudo, CFO Events Coordinator

Capitol Public Events

Phone: (517) 373-9617

Fax: (517) 373-8040

E-Mail: bthumudo@legislature.mi.gov

Mail Payment To:

Michigan State Capitol

c/o Barb Thumudo

P.O. Box 30014

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