

APPLICATION FOR USE OF MBA FACILITIES

Independent Contractor Con	npany's Name: _		
Independent Contractor's Name:		Tel.#:	
Address:	City:	State:	Zip Code:
Independent Contractor agre	es to pay the sum	of \$	
Independent Contractor agre	es to pay deposit s	5	
Independent Contractor ag	rees to pay 100% a	of total amount du	e as non-refundable deposit to
reserve the date/time at MB	'A.		
New customer: Yes / No	(How many times	each year?)	
Is background check of cust	omer required? Ye	es / No	
If yes, customer signature: _		and ba	ckground check form needs to
be completed by customer.			
Name of Event:			
Brief Description:			
Date of Event:			
Day of Event:			
Time of Event:			
Audience: Public Pri	vate		
Number of teams or individ	uals participating i	n the event:	
Expected spectator attendan	ce:		

NOTE: DO NOT ADVERTISE EVENT UNTIL THIS EVENT HAS BEEN APPROVED.

Note: In addition to this form, you may be required to complete additional form(s) and provide a certificate of insurance for a minimum of \$1 million general liability insurance and list Mississippi Basketball and Athletics, 2240 Westbrook Rd., Jackson, MS 39211, as an additional insured and as the certificate holder.

Contractor Expenses:

** Mandatory

Are basketball court(s) needed? Yes / No	Is the football field needed? Yes / No		
If yes, total cost to use hour(s): \$			
Days of week: Football Field	# of hours needed:	<i>Cost:</i>	
Glass meeting room: Yes / No	Cost: \$		
Downstairs large meeting room: Yes / No	Cost: \$		
Upstairs large meeting room: Yes / No	Cost: \$		
Male locker room: Yes / No	Cost: \$		
Female locker room: Yes / No	Cost: \$		
Entrance or Gate fee charged: Yes / No	Cost for entrance: \$		
% or amount given to M	BA for each entrance: \$		
Security: Yes / No	Cost: \$		
Referees: Yes / No	Cost: \$		
Scoreboard Keeper: Yes / No	Cost: \$		
Scoreboard Operator: Yes / No	Cost: \$		
** Janitorial Clean: Yes / No	Cost: \$		
Parking lot attendant: Yes / No	Cost: \$		
Trainer: Yes / No	Cost: \$		
Trophies/Medal/Awards: Yes / No	Cost: \$		
Ads/Marketing Materials: Yes / No	Cost: \$		
Other (specify): Yes / No	Cost: \$		
□ Approved			
□ Disapproved			
Recommendation(s):			
Board Member's Printed Name:	Date:		