

UNIVERSITY SYSTEM OF MARYLAND AT SOUTHERN MARYLAND

NON-PROFIT ORGANIZATIONS
TRAINING/CONFERENCE FACILITIES USE AGREEMENT
SCHEDULE A – FEES

Organization Name: \_\_\_\_\_

Contract Signatory: \_\_\_\_\_ Program Organizing Contact : \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Phone No: \_\_\_\_\_ Phone No: \_\_\_\_\_

Program Information

Date(s): \_\_\_\_\_ Set-up Time: \_\_\_\_\_ Program Time: \_\_\_\_\_ to \_\_\_\_\_

Program Name for signage: \_\_\_\_\_

No. of attendees: \_\_\_\_\_

Payee Contact Information (Person responsible for receiving invoice and making payment)

Name: \_\_\_\_\_

Phone No: \_\_\_\_\_

Email Address: \_\_\_\_\_

TO BE COMPLETED BY USMSM REPRESENTATIVE:
Estimated Program Total: \_\_\_\_\_
(includes Room, Equipment & Additional Services and Catering fees (if applicable)).

Maryland Tax Exempt – the Client must provide a copy of their tax-exempt certificate with this Agreement

Room Fees (A full day consists of no more than 9 hours – a half day consists of 5 hours or less)

Table with 3 columns: Room Name, Full Day, Half Day. Rows include Center Hall (All three sections), Center Hall (An Individual Section), Center Hall Gallery, Lecture Room 135 Building II, Classrooms, Computer Lab, North Corridor, South Corridor, OR Rotunda, Student Lounge, and Catering Kitchen.

Equipment & Additional Services

Table with 2 columns: Service Name, Price. Rows include Technology Service, Staff required for weekend events, Conference Telephone and Active Telephone Line, Coffee Pot/Bubble Cooler Rental/Refrigerator & Ice Usage, Flipchart with pad of paper, Catering, Security Personnel, and Linens.

Special Instructions/Notes:

# UNIVERSITY SYSTEM OF MARYLAND AT SOUTHERN MARYLAND

## NON-PROFIT ORGANIZATIONS

### TRAINING/CONFERENCE FACILITIES USE AGREEMENT SCHEDULE B – POLICIES

The University System of Maryland at Southern Maryland, hereafter called USMSM, is operated in order to accommodate the need for classes held by various University Partners. Center Hall, multi-purpose room, lecture room, classrooms, computer labs and open spaces may be used by other organizations. Facility use is on an as-available basis and with the authorization of the Executive Director. The USMSM Training and Conference Facilities is self-supporting and will charge applicable fees for the facilities and services it provides. You and your organization (hereafter called the Client) agree to adhere and abide by the following policies:

**ROOM SETUP:** If Client requires a special setup of tables, the information must be provided to USMSM no later than the Wednesday of the previous week of the planned program. Each room contains a computer, projector & screen and whiteboard & supplies. Podiums (tabletop or lectern) available upon request. Sound equipment and microphone(s) available for use in Center Hall only. **NOTE: USMSM will make its best effort to accommodate last-minute changes made after the deadline noted above; however, USMSM may not be able to accommodate all or even any changes after the deadline. This includes technology and space/configuration changes, as well as beverage service. Thank you for your understanding.**

**SPACE REQUIREMENTS:** USMSM retains the right to alter room assignments within reason and with advance notice to Client at least 48 hours prior to planned program if possible.

**COMPUTER FACILITIES:** Computer training software materials must be supplied, ready for installation, at least five (5) working days in advance of Client's reservation. Software will be installed by our computer technician at the rate listed on Schedule A - Fees. **ABSOLUTELY NO FOOD or BEVERAGES ARE PERMITTED IN THE COMPUTER LABS. NO EXCEPTIONS.**

**CONFERENCE/TRAINING MATERIALS:** Upon notification, USMSM will accept and store a limited number of boxes and materials which are delivered no later than one (1) day prior to Client's reservation. All boxes and materials must be removed at the end of planned program.

**CATERING:** Client may make arrangements with a USMSM-approved caterer. The caterer must provide USMSM a copy of its Department of Health & Mental Hygiene license and an insurance certificate naming USMSM as an insured in the amount of \$1,000,000 seven (7) calendar days prior to the planned program. Client is responsible for supervising clean up by the caterer and making payment directly to the selected caterer for services rendered. USMSM accepts no liability for food services arranged by Client. Completion of Schedule C -Catering Agreement is required. **NOTE: We encourage attendees to bring their own reusable water bottles. There are water bottle refill stations in all of our buildings, and we will have water coolers and paper cups available in USMSM's larger event spaces.**

**ALCOHOLIC BEVERAGES:** Alcoholic beverages cannot be brought into USMSM without Client or the Client's catering company having a TAMS/TIPS certified bartender providing service during the event. A copy of the certification shall be provided to USMSM prior to the reservation date and security personnel will be required to be present during Client's program for an additional fee as outlined in Schedule A - Fees. USMSM will schedule the security personnel one (1) month prior to the start date of your program. The cost of the security personnel will be listed on the invoice along with the rental space charges.

**SMOKING:** USMSM is a non-smoking facility.

**DAMAGES:** Client will take full responsibility for any damages that may occur to the facility, equipment or furniture while using USMSM and will incur the cost of any necessary repairs or replacement.

**LIABILITY:** USMSM is not liable for any fees or expenses incurred by Client (or Client's trainers and/or attendees) in the event a training program or conference is not held or completed due to acts of nature (i.e.: snow storm, lightning strikes, etc.).

**INDEMNIFICATION:** It is hereby expressly understood and agreed by Client that Client shall be solely and absolutely responsible and liable for its own conduct and for the conduct of any guests Client may invite to use the facility. Client hereby agrees to indemnify and hold harmless USMSM for damages to the facility or any part of the premises of USMSM as well as any and all claims for personal injury by any person or persons arising out of, occasioned by, or in any way connected with Client's use of the facility or caused by Client's use of USMSM, other than damages arising from the negligence or gross misconduct of USMSM. Client understands and expressly agrees that Client shall be responsible and liable for the indemnification specified herein in addition to the use fee.

**PROMOTIONS:** Program promotion requires Client to refer to the facility as "University System of Maryland at Southern Maryland". Any printed materials regarding USMSM's mission or programs must be approved by the Executive Director prior to publication.

**PRICING:** Facility prices are as stated in the "Training/Facilities Use Agreement, Schedule A - Fees".

**CONTRACT:** The complete and signed agreement which consists of Schedules A - Fees, Schedule B - Policies, and Schedule C – Catering Agreement must be received by USMSM three (3) weeks prior to the start date of your program. USMSM retains the right to cancel the reservation and this agreement if the contract has not been received within this period.

**CANCELLATION:** USMSM makes considerable effort to properly schedule personnel, rooms and equipment to best service Client's planned program. Any cancellations must be communicated in writing to USMSM no later than ten (10) working days of the program start date.

**PAYMENT:** Invoices will be mailed after the program end date or at agreed upon intervals for long-term programs. Payment terms are "net thirty" (30). USMSM can accept payment by VISA, MasterCard, American Express, or check. Checks should be made payable and sent to: University of Maryland, 44219 Airport Road California, MD 20619.

I, as an authorized representative of my organization, understand and agree to adhere to USMSM's policies as stated above.

\_\_\_\_\_  
Signatory's Signature & Date

\_\_\_\_\_  
USMSM Authorized Representative's Signature & Date

UNIVERSITY SYSTEM OF MARYLAND AT SOUTHERN MARYLAND

TRAINING/CONFERENCE FACILITIES USE AGREEMENT
SCHEDULE C – CATERING ARRANGEMENT SERVICES AGREEMENT

Option A – No catering will be provided during program or Client will directly provide catering (does not include using an outside caterer – see Option B).

Option B – Client elects to make their own arrangements with a caterer/food service provider approved by USMSM who has filed, or is willing to file, copies of their business licenses with USMSM.

Client has selected \_\_\_\_\_ to provide our catering services. I, as an authorized representative of Client, hereby elect to make our own arrangements for food to be provided at our planned program. I have indicated our caterer above and will be responsible for ensuring that the appropriate business licenses are on file before our program date. I understand that our responsibilities include: arranging for all serving equipment, serving utensils, linens, eating utensils, plates, cups, etc. to be provided by Client or our selected caterer/food service provider; supervising clean up; and making payment directly to the selected caterer or food service provider. I further understand that USMSM accepts no responsibility for food services arranged by Client.

Signatory's Signature & Date
(only complete if Option B chosen)

Option C - Client authorizes USMSM to arrange for beverage services from the following list of menu choices. For programs with over 30 participants anticipated, an additional administrative fee of 6% will be added to the total cost of catering.

USMSM BEVERAGE CHOICES
Morning Beverage Choices (Available between the hours of 7am-11am)
The Eye Opener (6 person minimum) (includes coffee & tea).....\$3.00 per person\*
Afternoon Beverage Option (Available between the hours of 1pm-4pm)
Coffee Break (Includes coffee & tea).....\$3.00 per person\*
\*Please calculate number of drinks to account for refills to be consumed by attendees\*

Morning: Date(s) \_\_\_\_\_ Time Served \_\_\_\_\_ No. of Beverages \_\_\_\_\_

Menu Choice [ ] The Eye Opener [ ] Coffee Break \_\_\_\_\_ Cost per person \_\_\_\_\_

Afternoon: Date(s) \_\_\_\_\_ Time Served \_\_\_\_\_ No. of Beverages \_\_\_\_\_

I, as an authorized representative of my organization, hereby authorize USMSM to make the necessary arrangements to provide beverages at our planned program. Client agrees to all prices and minimums as indicated on this agreement.

Signatory's Signature & Date
(only complete if Option C chosen)