





GOVERNMENT COLLEGE OF ENGINEERING (AUTONOMOUS) BARGUR-635 104

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AUDITORIUM REQUEST FORM

Name of person making request:			
Name of group/department to be	using the aud	litorium:	
Name of person who will be resp	onsible for th	e condition of the auditorium and e	quipment:
Name of the event to be Conducted	d:		
Date(s) and Duration of the event:	:		
Expected audience size:			
Describe the event to be conducted	ed in the audit	torium (meeting awareness etc.)	
		(
Equipment needed for this event:			
Item	Quantity Needed	Item	Quantity Needed
Stage Focus Light		Ahuja-MP3 Digital Player-SSA-250 DP -PA Mixer Amplifier	
BenQ Projector with remote control		Ahuja-TZA-4000 DPM- PA Mixer Amplifier	
Ahuja-PMX-1032FX-Professional		Studiomaster-SVC-S2000 VA-	
Mixer Mic		Automatic Voltage Stabilizer Mic Stage Stand (Wood/Steel)	
Microphone Receiver		AC	
Computer Table (Big/Medium)		Plastic Chair	
Reception Table		VIP Chair	

*All equipment will be returned to its proper storage area, all doors will be locked, Water Supply connections are closed and all Ights and heating cooling systems will be turned off at the completion of this activity.

Other equipment needed:







Rules and Regulation for Auditorium

Below is a list of rules that must be followed in order to use Auditorium facilities.

- No food or drinks are allowed inside the auditorium.
- No tape or glitter can be used on the stage.
- Volume must be kept at a minimum.
- No alcohol or drugs are allowed on campus.
- No lewd or obscene behavior.
- No weapons are allowed.
- No confetti can be used in or outside the facilities.
- The party is responsible for the actions of their guests and hired services.
- The use of candles, open flames and smoke/fog machines are not permitted.
- If there is any damage to the facility, displays, exhibits or any of the building's contents during the event, the responsible person or person making request shall be required to pay for all necessary repairs or replacement. This includes any damage to the technical equipment when operated by anyone.
- Covid SOP must be followed.

I hereby accept and agree to the rules provided by the Administration.

Name& Signature of Person Making request

Name & Signature of responsible Person