



Fort Peck Community College

P.O. Box 398
Poplar, MT 59255
Ph. (406) 768-6300
Fax. (406) 768-6301

FACILITY USE FORM

(PLEASE PRINT)

The College serves the people by initiating and supporting community activities and organizations based on the needs and wishes of community members, which promote the social education and well-being of the Fort Peck Indian community.

Name of Person or Group requesting use (responsible party, billing information); If a student organization the form must be signed by BOTH the faculty/staff advisor and the student group president and must be approved of prior to scheduling room use. **Final approval is required by a Vice President before request is scheduled.***

Name: _____

Email: _____

Phone: _____

Billing Address: _____

City/State/Zip: _____

Today's Date: _____

Rental Type: Personal Organization

Organization: _____

Date of Function: _____

Time of Function: _____

Purpose of Request: _____

of People Expected: _____

Building Requested: _____

Purchase Order #: _____

- Classroom # _____
- Community Room
- Kitchen
- Foyer
- Auditorium

Equipment Needed:

- Phone
- Projector
- TV/DVD
- CEU's

Return completed form to Poplar Campus or Wolf Point Campus two (2) weeks prior to event.
Forms may also be emailed to: Thomas Brown (TBrown@fpcc.edu), Poplar (406) 768-6300 or
Ember Runs Through (ERunsThrough@fpcc.edu), Wolf Point (406) 786-6380

WARNING: Failure to clean up after your event, tampering with electrical systems to include building breaker boxes such as fire/smoke alarms, furnace pilot lights, and security systems could affect future use of college facilities.

DISCLAIMER – FPCC is not responsible for accidents, thefts, injuries or other criminal activity, which may occur during the proposed use of the facilities described on this form.

PAYMENT MUST BE PAID IN FULL PRIOR TO USAGE OF ANY FPCC BUILDING
FPCC RESERVES THE RIGHT TO REFUSE OR DENY THE USE OF ANY FACILITY

Monday – Friday \$125
Friday Evening – Sunday \$250

Make all checks payable to: Fort Peck Community College

FOR OFFICE USE ONLY

*VP Approval Signature: _____ Date _____ Invoice # _____