

Use of Parking Facilities by Performance Groups

Rules

1. Performance groups must be sponsored by a registered organization as recognized by The Office of the Dean of Students, listed on <http://campusorgs.uci.edu>.
2. Students, listed on <http://campusorgs.uci.edu>.
3. Prior to reserving any parking facilities, groups must verify other dance locations provided by Campus Organizations to determine if there are any open rooms where they may hold their practice. Parking facilities should be considered a last resort.
4. Before occupying a parking structure for practice, performance groups must have proof of insurance before calling Guest and Event Services at (949) 824-2691 to obtain permission and location assignment. Practices will be limited to 25 people and absolutely no spectators are permitted. The structures cannot be used for tryouts or performances.
5. All vehicles must be parked in the designated parking spaces and must have valid permits.
6. Practice hours are from **6:00 PM to 10:00 PM** Monday thru Sunday.
7. Dance practices in the parking structures need to be in the lowest level of the structure and coned off for safety.
8. The practice area must be left free of trash.
9. Use of any staging equipment such as additional lights, tables, chairs, and amplifiers are prohibited.
10. Use of tape of any type on the ground is prohibited.
11. Practices may not impede any vehicular traffic.
12. All music must be kept at or below 70 dBAs, this is the same noise level as a blow-dryer.
13. The signing member of the performance group must be present during all practices.

Consequences

Any violations will be reported to the Director of Campus Organizations and may result in additional sanctions (Please refer to Section 102.00 and 105.00 of the University of California Policies Applying to Campus Activities, Organizations, and Students).

I have read the above rules and agree to abide by them.

For Internal Office Use Only

Name: _____

Start Date: _____ End Date: _____

Signature: _____

Days of the Week: _____

Club Affiliation: _____

Practice Times: _____

Club Email: _____

Phone Number: _____

Date: _____

Updated: 09/26/14

Location: _____
Supervisor Signature: _____
Event #: _____
<input type="checkbox"/> Proof of Insurance <input type="checkbox"/> CSO training <input type="checkbox"/> Cones