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**Request for use of JCR and bar**

**The Head Porter will consider each application for an event. If it will not disrupt events in the adjoining areas and does not breach the "noisy night" rule, which is no more than 15 noisy nights in the Michaelmas and Lent terms and only 3 in the Easter term on the first two weekends and on the final Friday, approval may be granted.**

**Please note that, in submitting this form, the Event Organiser is confirming that they are a member of Clare College.**

Name of person who will be the responsible organiser and present at the event: Name of Event Organiser

Is the person an Undergrad or Grad? Please select

Email address CRSid@cam.ac.uk Mobile phone number Telephone Number

Date that the JCR and bar are needed Please select At what time will the JCR and bar be needed? Start and end time

Will there be a charge for attendance (i.e. tickets)? Y/N How many are expected to attend? XXX

Will you need exclusive use of the JCR? Please select.

Will there be a band/live music or DJ? Y/N What is the name of the event Event Name.

Event Description Please describe your proposed event briefly. If necessary, further information can be emailed to the Bookings Manager.

If you are booking on behalf of an organisation external to Clare, what is the name of that organisation? Name of organisation

Please note that if you are booking on behalf of an organisation (such as a society) external to the College (e.g. University-wide) you must provide a written description of Clare participation in the event to be reviewed by the Bar Committee and the UCS.

IMPORTANT: In submitting this document, the Event Organiser is indicating that they have read the Rules Document in full and understand that they are solely responsible for any breach of the rules therein. The Event Organiser is thus responsible for the cleanliness of the JCR, Bar area and (if applicable) Buttery area.

The Event Organiser should also be aware that events may be subject to a charge levied by the UCS, at the discretion of the Bar President and UCS President.

Bar team member name **Nancy Wilson** Signature ……………………………………… Date Received

Approved by the Head Porter or delegated deputy………………………………….…………….…… Date …………………….