

Back Bay Science Center

Facility Use Request Form

Name of Group/Organization _____

Type of Group/Organization _____
(e.g. Non-Profit, Private, Government)

Address _____

Name of Person Making Request _____

Title/Position _____

Contact Phone #'s _____ Work _____ Cell _____

Contact Email _____

Name of Proposed Function or Event _____

Proposed date(s) _____

Proposed time frame _____

Please specify what type of function you are requesting (check ALL that apply):

- | | | |
|--|---|--|
| <input type="checkbox"/> Workshop | <input type="checkbox"/> Weekend Program | <input type="checkbox"/> Outdoor touch tank/ trail program |
| <input type="checkbox"/> Weekly Camp | <input type="checkbox"/> Scout Program | <input type="checkbox"/> Fishing Program |
| <input type="checkbox"/> Public Event | <input type="checkbox"/> Non-Formal Education | <input type="checkbox"/> Research |
| <input type="checkbox"/> Meeting | <input type="checkbox"/> Formal Education | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Facility Tour | | Contract Required (if applicable)** |

What is the maximum number of expected participants? _____

What is the maximum number of cars expected? _____

If children are planning to attend, what is the age range expected? _____

Do you plan to use amplified sound outside? (Circle one) Y or N -- If yes, please explain

Are you planning to serve food? (Circle one) Y or N -- If yes, please list types of food & drink

Do you plan to charge any fees? (Circle one) Y or N -- If yes, how much per person and what is the money covering and/or to be used for? _____

Which of the following area(s)/equipment are you requesting for your program?
(check ALL that apply):

- | | | |
|---|--|--|
| <input type="checkbox"/> Teaching Lab A | <input type="checkbox"/> Trail | <input type="checkbox"/> Pontoon Boat (Requires DFG Staff) |
| <input type="checkbox"/> Teaching Lab B | <input type="checkbox"/> Dock | <input type="checkbox"/> Carolina Skiff (Requires DFG Staff) |
| <input type="checkbox"/> Culture Lab (Research) | <input type="checkbox"/> Amphitheater | <input type="checkbox"/> Kayaks or Canoes (Requires DFG Staff) |
| <input type="checkbox"/> A/V Equipment | <input type="checkbox"/> Plant Nursery | <input type="checkbox"/> Outdoor Touch Tanks |
| <input type="checkbox"/> Conference Room | <input type="checkbox"/> Restrooms | <input type="checkbox"/> Parking Lot |

Are you requesting the BBSC to supply staff or volunteers? If so, please specify your needs:
(NOTE-- use of the dock automatically requires a DFG staff person to be onsite)

**If a contract is required, please attach a copy of the contract to the facility use request form.

***ATTACH** a 1-page project description of your proposed function/event. Include a detailed explanation how this function/event connects to the mission of the BBSC.