THE UNIVERSITY OF HONG KONG CHONG YUET MING CULTURAL CENTRE



Tel: 3917 1281

General Office: Room 401, Chong Yuet Ming Cultural Centre

Yuet Ming Auditorium Booking Application

Application Instructions:

- 1. Please read through the "**Yuet Ming Auditorium Information Guide for Users**" before completing the application form, which can be downloaded from CYMCC's website http://www.cedars.hku.hk/campuslife/cymcc.
- 2. The completed application form should be submitted to cymcc@hku.hk.
- 3. Applications made less than 2 months before the function will not be considered unless under exceptional circumstances.
- 4. Applicants may submit up to 3 choices, in order of priority, of the booking period for their functions.
- 5. Applicants will be invited to discuss with the Cultural Centre management staff on matters related to their booking requests. For potential applicants, they will be further invited to conduct a site visit and have a technical meeting when required.
- 6. Applicants will be notified of the booking results at least 2 months prior to the date of function.
- 7. For enquiries related to the venue, please contact us via 3917 1281 or email to cymcc@hku.hk.

Part I - Application Details

A. To be completed by HKU Department / Student Society / Student Group

Name of Department / Student Society/ Stu	ident Group*:		
Name of Applicant:		Chinese N	lame:
Staff No. / Student No (if applicable):		Tel. No.:	
Position in Department/Student Society*:			
Email:		Fax No.:	
Person in-charge of the Function:			
*Please delete as appropriate B. To be completed by Non-HKU Organi	zations		
Name of Organization:			(Registered English name)
			(Registered Chinese name)
Address of Organization:			_
Name of Applicant:		(English)	(Chinese)
Position Held by Applicant:			
Tel. No:	F '1		



Part II - Booking Period

The booking period shall include adequate time for setup, rehearsal, performance, cleaning and strike out. The maximum duration for each single booking may be up to 5 consecutive days.

Dark Day: Mondays Maintenance period subject to annual schedule. No prior notice on block period.

Priority	Dates	09:00 - 13:00#	13:00 - 14:00	14:00 - 18:00#	18:00 - 19:00	19:00 - 23:00#
1st choice						
2nd choice			Meal Break		Meal Break	
3rd choice						

Please indicate the mode of booking in the following table.

O: Short Term Occupancy

R: Rehearsal / Set-up / Move-out

P: Performance / Conference / Seminar

	09:00 - 13:00	13:00 - 14:00	14:00 - 18:00	18:00 - 19:00	19:00 - 23:00
Day 1				Meal Break	
Day 2					
Day 3		Meal Break			
Day 4					
Day 5					



Part III – Booking Information

Name of Event:				
Nature of Event#:	□ Performance:	Drama	□ Music	□ Variety Show
	Conference / Sym	nposium / Foru	ım / Screening	
	□ Others (please spe	ecify) :		
	g. theme, title, prograr			s, etc.)
- Please include Pr	oduction Schedule, ru	indown details		
Estimated No. of				
Performers / Speaker	:s:	E	stimated No. of Aud	ience:
Admission Fee: <u></u> \$	/ Free	*		
Ticketing sale: Publ	ic Channel / Internal*			
(If via public channe	1: Please specify:)	
Any sale of merchan	dise during the event?	Yes / No*		
If yes, please specify	the merchandise item			
Name of sponsor(s)				
Name of co-presente	er(s) (if any)			
*Please delete as approp	oriate # Øwhere	e applicable		



DECLARATION

I confirm that I have read and accepted the contents of the "Information Guide for Users" and "Venue Rental Charges of CYMCC Yuet Ming Auditorium", and declare the information filled in this application form and supplementary information attached is correct and true. I acknowledge the Event shall be carried out in accordance with the above details, and will not transfer or sub-let the venue.

If CYMCC accepts our booking, I agree to abide by all the Rules, Regulations, and Conditions of Hire of Yuet Ming Auditorium and the venue hiring charges shall be made in accordance with the "Venue Rental Charges for Approved Events". I also agree CYMCC may, at its absolute discretion, turn down my application or refuse to the application without the need to give any reasons or explanation.

Chop of Department / Student Society / Student Group/ Organization* Represented:		St
Signature:	Signature:	
Name of Applicant:	Name of Applicant:	
Date:	Date:	
e # ⊠where applicable	# 🗹 where applicable	*Please delete as appropriate