

## Busking Area Booking Application

### *Application Instructions:*

1. The completed application form should be submitted to [cymcc@hku.hk](mailto:cymcc@hku.hk).
2. 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 when required.
3. For enquiries related to the venue, please contact us via 3917 1281 or email to [cymcc@hku.hk](mailto:cymcc@hku.hk).

### **Part I - Application Details**

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

Name of Department / Student Society/ Student Group\*: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Chinese Name: \_\_\_\_\_

Staff No. / Student No (if applicable): \_\_\_\_\_ Tel. No.: \_\_\_\_\_

Position in Department/Student Society\*: \_\_\_\_\_

Email: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Person in-charge of the Function: \_\_\_\_\_ Tel. No.: \_\_\_\_\_

*\*Please delete as appropriate*

#### **B. To be completed by Non-HKU Organizations**

Name of Organization: \_\_\_\_\_ (Registered English name)

\_\_\_\_\_ (Registered Chinese name)

Address of Organization: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ (English) \_\_\_\_\_ (Chinese)

Position Held by Applicant: \_\_\_\_\_

Tel. No: \_\_\_\_\_ Email: \_\_\_\_\_

**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.

**Maintenance period subject to annual schedule. No prior notice on block period.**

Priority	Dates	Time
1st choice		
2nd choice		
3rd choice		

**Part III – Booking Information**

Name of Event: \_\_\_\_\_

Nature of Event#:  Rehearsal:       Drama       Dance       Variety Show  
 Exhibition  
 Others (please specify): \_\_\_\_\_

**Details of Event** (e.g. theme, title, programmes and name of artists / speakers, etc.)

**Name of sponsor(s)** (if any) \_\_\_\_\_

**Name of co-presenter(s)** (if any) \_\_\_\_\_



## **DECLARATION**

If CYMCC accepts our booking, I agree to abide by all the Rules, Regulations, and Conditions of Hire of Busking Area. 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: \_\_\_\_\_

Signature: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

**\*Please delete as appropriate**