



**THE UNIVERSITY OF THE WEST INDIES  
OPEN CAMPUS DOMINICA  
ROOM RESERVATION FORM**

PHONE: (767) 448-3182, (767) 448-3482; FAX: (767) 448-8706; EMAIL: DOMINICA@OPEN.UWI.EDU

NAME & COMPANY INFORMATION		
Authorized Personnel	Organization/ Company Name	Email Address
Office Phone Number	Mobile Phone Number	Fax Number
Mailing Address		

REQUESTED ROOM(s) <i>(Please tick appropriate)</i>			
	MAXIMUM CAPACITY*		MAXIMUM CAPACITY*
Auditorium	80	Main Classroom	70
UWIDEC II	30	Video Conference Room	20
Computer Lab	22	Other	

\*Actual room capacity is dependent on requested arrangement

EVENT INFORMATION								
Requested Date(s):	Month	Start	Year	Multi-Day Event Yes	If yes, choose end date:	Month	Finish	Year
		Day					Day	
Pre-Access Time	Event Start Time			Event End Time		Post-Access Time		
:	:	:	:	:	:	:	:	
Name of Event:				Type of Event:				
Number of People Attending <i>(rooms will be allocated based on seating requirements):</i>								

PRESENTATION EQUIPMENT AND SERVICES <i>(Please tick appropriate)</i>	
Indicate electronic equipment required:	Indicate other equipment required:
Projector Laptop PA System Internet Access	Whiteboard Chalkboard Flip Chart

FEES	
Room Only: EC \$200.00 per room	Room & Electronic Equipment: EC \$250.00 per room

OTHER REQUESTS

**TERMS AND CONDITIONS**

The purpose of this agreement is to set the terms and conditions under which the University of the West Indies, Open Campus Dominica may operate and provide room services under this contract.

**RESERVATIONS:** To reserve a room at the University of the West Indies Open Campus, Dominica, please call (767) 448-3182 or visit the Office at Elmshall Road, Roseau, Commonwealth of Dominica.

**FEES:** All fees are to be settled in keeping with the guidelines outlined on the Invoice.

**NOTICE:** Notice of cancellation of reservation must be made within two (2) days prior to the date of the event.

**CATERING:** You are responsible for your own catering services.

**DAMAGES:** Any damage to the facilities, furniture or equipment will be invoiced to the authorized personnel/company organizing the event.

**INDEMNITY:** The Client agrees to indemnify the University of the West Indies Open Campus, Dominica, their officers, agents and employees for any and all liability, claim, loss, cost of obligations on account or arising out of injury, death or damage to persons or to property from whatever cause where such injury, death or damage to persons or property is connected with the event.

**TERMINATION:** University of the West Indies Open Campus, Dominica reserves the right to suspend or terminate the function in the event of non-compliance.

**THIS AGREEMENT** is made between the University of the West Indies, Open Campus Dominica and

I, on behalf of, and as an authorized agent of the above named organization, agree to abide by the policies of the University of the West Indies Open Campus, Dominica regarding the use of facilities.

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**NAME**

\_\_\_\_\_  
**SIGNATURE & STAMP**