



Conference and Event Services

9630 Gudelsky Drive
 Rockville, MD
 20850

Phone: 301.738.6059
 Fax: 301.738.6050
 Email: sg-ces@umd.edu

Security at USM Shady Grove Center Events

This information must be provided by a member of the renting organization with decision making authority. In order to proceed with any rental contract for the facility, this form must be completed and approved 7 business days prior to the event. USM Shady Grove Center/ Universities at Shady Grove will maintain the right to determine and require the appropriate event security for any event held on our premises. Campus Security is not responsible for event security. In addition a police supervisor may be required depending on the size of the event and number of officers required.

General Guidelines Considered in Determining Security Needs.

1. *Expected Crowd Size:* The size of the crowd is one of the factors that helps determine the number of security personnel required. A security position is defined as an off-duty Montgomery County Police Department (MCPD) Officer or a University of Maryland (UMPD) police officer. These officers will be provided by the University but will be paid for by the renting organization. In the case of an MCPD officer payment will be either made to the officer or through FOP Lodge 35. In the case of a UMPD officer payment will be made to the Universities at Shady Grove. In addition the sponsoring organization may provide security personnel to augment the MCPD or UMPD officer. These personnel are required to identify themselves to the officer(s) prior to undertaking any security duties. A general guideline for security positions (officer) based on estimated crowd size is as follows:

CROWD SIZE	SECURITY POSITIONS
1-250	1-3
251-500	2-5
501-750	3-7
751-1200	4-12
1200+	To Be Determined

2. *Nature of Event and Nature of Crowd:* The nature of the event, the nature of the crowd and the expected attendees may influence security requirements. Additional security may be recommended depending on the age of the expected attendees; whether attendees are from outside the University community or part of it; advertising of the event; and based on the attendee activities typical of a particular type of event. Consideration also will be given to the following factors, among others: use of DJ's, live bands or other performers, presence of alcohol and expected event conditions.

3. *Security Needs for Similar Events:* Prior security history pertaining to similar events sponsored by the organization in the past or at similar venues will be considered. Event organizers may be required to provide references for events they have held at other locations. Factors such as ability to coordinate, communicate and cooperate, will also be used to determine security needs.

4. *Sponsoring Staff:* The sponsoring organization will be expected to designate individuals to assist the police in conducting the event in an orderly fashion. Organizer would be responsible for establishing orderly lines for entry, selling of tickets, stamp hands for re-admittance, check identification, etc. Police officers' decisions concerning the organization of the event will be **FINAL**.

5. *Money Collection:* Additional security positions are recommended whenever an event is accompanied by money collection activities.



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6. *Searches:* Searches of event attendees (such as when required by performers, lecturer, or Police) are the responsibility of the sponsoring organization. MCPD and UMPD officers do not conduct searches of persons entering the event. An officer is required at every point of entry where searches are to be conducted.

Client Responsibilities:

1. Provide individuals to check ID's if necessary and regulate attendance as needed.
2. Accept full responsibility for all security costs and related costs for services, damage to and/or loss of facilities or equipment, unless such costs are provided for otherwise, as expressly approved by the University.
3. Assign an authorized representative to be responsible for the planning and implementation of the event. Provide a copy of any advertising/flyer or announcement used to promote the event. This representative shall also be present for the duration of the event. This person should be readily available and accessible in the event of a disturbance or other problem. The representative should identify him or herself to security and USM staff at the beginning of the event. Except as expressly pre-approved and authorized, ensure that members of the sponsoring organization do not advertise the event off-campus.
5. Montgomery County Police officers are sworn law enforcement officers of the State of Maryland. COST: \$40-\$50 per hour, three hour minimum. UMPD officers are paid at a rate of \$42 per hour. Officers are scheduled with one hour allocated prior to the start of the event to allow for briefing and obtaining required equipment and one hour after the event has ended to allow for the crowds to vacate the event. ***Event organizers are responsible for payment to MCPD officers either directly or through FOP Lodge 35. Event organizers are required to pay MCPD officers separately.***

Amplified Sound

Approval will be granted for use of amplification equipment at events if there is a high probability that the planned event will not disrupt or disturb other University activities. In-house sound systems are to be used in an appropriate manner to ensure other activities in the building are not disturbed. Additional amplification may not be used without the approval, based on an assessment of the potential for disruption of other activities. If noise complaints are received from the surrounding community, the University will have the authority to ask event sponsors to lower the sound level or if necessary terminate the event.



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Event Registration Form

Event Coordinator

Name: _____
Title: _____
Address: _____
Phone # (2): (cell) ___/___/___ (other) ___/___/___
E-mail: _____
Alternate Contact Information (Name, email, phone):

Organization Information

Name (include 501.3 information for non-profit): _____
Address: _____
Phone: ___/___/___
Website/email: _____/_____

Event Information

Title of Event: _____
Date(s): _____
Desired Location: _____
Access Start/end time: _____/_____
Door open/close time: _____/_____



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The following questions must be answered in full, before approval can be obtained.

1. Please provide a brief description of your event:

2. Is this your first event for your organization? If no please provide dates of your last 3 events and facilities were used.

YES NO (Date/Venue/Leasing Contact)

3. Is this event being co-sponsored by another organization? If yes please provide name of co-sponsoring organization and contact person/information.

NO YES, Information: _____

4. Check off how you are advertising the event.

Not at all Web sites Email Flyers Off Campus

If any of the above advertising means are used a copy of the advertisement must accompany this registration form!

5. What is your estimated attendance for the event and % of visitors?

1-250 251-500 501-750 751-1200 1201+ _____

% of non-affiliated attendees _____

6. Number of organization members assisting with coordinating event and supervisor.

_____ Supervisor: _____

7. Is food and/or alcohol being served?

Alcohol Food



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8. Will you be charging admission? If so, how much, cash, process, etc....
No Yes (If yes give details): _____

9. Please name any vendors and products that may be sold:
Vendors/Products: _____

10. Will there be any lecturers or guest speakers?
NO YES, Name and Topic _____

11. Specify name of any and all Band, DJ, or other performers:

12. Please describe any specific security concerns you might have regarding your event?

13. Will you be able to provide liability insurance at the time of the contracting, in which both the Licensee and the University are named as insured with minimum policy limits of one million dollars for personal injuries, including death, and one million dollars in aggregate for all property damage? YES NO

THE PERSON SIGNING THIS LICENSE ACCEPTS RESPONSIBILITY FOR THE ACURACY ALL INFORMATION AND WARRANTS THAT HE/SHE IS THE LICENSEE OR LICENSEE'S AUTHORIZED REPRESENTATIVE:

Authorized Representative Printed Name: _____

Signature of Licensee's Authorized Representative: _____

Title _____ Date: _____

Printed Name: Alejandro De Jesus Associate Director, Conference and Event Services

Signature of Licensee's Authorized Representative: _____

UNIVERSITY OF MARYLAND, COLLEGE PARK, COORDINATING INSTITUTION,
University System of Maryland, Shady Grove Center, on behalf of the University System of Maryland.