



SR (MOS) Dance Studio Booking Form (via CityUHK Departments/Offices only)

Important Notes:

- 1) The completed Booking Form should be submitted to SRO (sro.mos@cityu.edu.hk).
- 2) Booking can be made 2 months in advance.
- 3) For cancellation, please notify SRO (sro.mos@cityu.edu.hk) as soon as possible.
- 4) All bookings are governed by the [Code of Student Conduct](#) and [Regulations Governing the Use of Venues](#).

I. Booking Details

Dance Studio (Max. capacity: 15)

Standard Build-in Provision:

| | |
|--------------------|----|
| Build-in AV System | TV |
|--------------------|----|

Rental Charges

| No. | Date (dd/mm/yyyy) | Time Slot (Available booking time: 14:00-22:00) (except Mondays) | No. of Hours | Charging Rate in HKD (per hour) | | | Total |
|--------------|----------------------|---------------------------------------------------------------------------|-----------------|--------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-------|
| | | | | CityUHK Departmental Activities (\$240) | Other UGC-funded Institutions & Non-profit Making Organizations (\$480) | Profit-making Activities (with exceptional approval) (\$960) | |
| 1 | | | | | | | |
| 2 | | | | | | | |
| Total | | | | | | | |

Payment Method:

- To be settled by the Departmental Account Code: _____
- To be settled by crossed cheque payable to City University of Hong Kong.

II. Function/Event

Name of Function/Event: _____

Name of Person-in Charge: _____ Position: _____ Department: _____

Contact No.: _____ E-mail: _____

III. Undertakings for the Use of Dance Studio

I understand and agree to:

- 1) have self-service on setting back to its original/reasonable state;
- 2) be held liable for any damages beyond normal wear and tear;
- 3) accept security's on-site interference for any non-compliance, blacklisting for future booking and claiming for compensation.

Signature of the Person-in-Charge
Name:

Date

Endorsed by Head of Department/Office
Name:

Date

Confirmation of Booking (*to be completed by SRO*)

- Confirmed by: _____ Date: _____
- Rejected for the reason: _____

SRO (MOS)/April 2025