

ACM Chapter Event - Technical Meeting Request Form (Event TMRF)

This form should be completed to obtain ACM approval for Chapter events. Please note that any affiliation with an ACM chapter requires approval from headquarters. Chapter events can only be approved if the chapter is in good standing, having submitted the most recent Annual Report.

The Event Chair is responsible for the event under the terms of the "Statement of Understanding" of this TMRF. All co-sponsors must sign the Hold Harmless Clause of the ACM TMRF (page 4).

The Event Chair should contact the Local Activities Coordinator at ACM headquarters with any questions.

Title of Event (+ Acronym): _____ (_____)

Date: _____

Meeting Location (city/state) _____ Facility _____

LIST OF SPONSORS:	Chapter Name/Locale	Percent Sponsorship
Sponsored by: ACM Chapter	_____	@ _____%
Sponsored by: ACM SIG Chapter	_____	@ _____%
Sponsored by: ACM Student Chapter	_____	@ _____%
Sponsored by: ACM SIG Student Chapter	_____	@ _____%

NOTE: Only non-profit organizations may co-sponsor a chapter event.

Other Sponsor (Name/Location): _____ @ _____%

LIST OF COOPERATING ORGANIZATIONS (name and contact):

Previous Dates, Location, & Sponsorship (if any): _____

Content of Meeting (brief abstract):

Estimated attendance:

Event Chair: _____

ACM Membership Number: _____ (required)

Employer: _____ Current Position: _____

Complete Mailing Address: _____

Contact Information:

Phone Number: _____, Fax: _____ Email: _____

Treasurer: _____

ACM Membership Number: _____ (required)

Employer: _____ Current Position: _____

Complete Mailing Address: _____

Contact Information:

Phone Number: _____, Fax: _____ Email: _____

Requested Chapter Services (please check):

- Publicity in ACM Conference Calendar and/or Membernet
- Chapter Announcements Listserv

ACM Chapter Event Budget Detail	#	fee	total
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REVENUE

Registration Income

Advance

- Chapter Members
- Chapter Student Members
- Other: _____
- Other: _____

Late/On-site

- Chapter Members
- Chapter Student Members
- Other: _____
- Other: _____

Total Registration Income

Exhibit Income

- Table tops
- Other: _____

Total Exhibit Income

Miscellaneous Income

- Corporate Support
- Other: _____
- Other: _____

Total Miscellaneous Income

TOTAL INCOME

EXPENSES

Publicity

Committee

Registration

On-Site Logistical Expenses

- Room Rental
- Screens
- Overhead Projectors
- Data Projectors
- Microphone Rental
- Music License Fees (Recorded)
- Security
- Networks
- Other: _____
- Other: _____

Total On-Site Logistical Exp.

Food & Beverage

of events # of pp \$/person

- Continental Breakfast
- Morning Coffee Refresh
- Afternoon Coffee Break
- Luncheons
- Receptions
- Banquet/Dinners
- Other
- F&B tax & gratuity @ 18% and 8.5%

Total Food & Beverage

Program/Publications

- Handouts
- Honoraria
- Speaker Travel

Total Program/Publications

Exhibits

Draped Tables
Electricity
Other: _____

Total Exhibits

Financial Activities

Bank Charges
Returned Checks
Bad Debts
Other: _____

Total Financial Activities

Total Expenses

Contingency

Gross Expenses

REVENUE SUMMARY

Registration
Exhibits
Miscellaneous
Gross Revenue

EXPENSE SUMMARY

Publicity
Committee
Registration
On-Site Logistics
Food & Beverage
Program/Publications
Exhibits
Financial Activities
Conference Management
Total Expenses
Contingency
Gross Expenses

Gross Revenue
Gross Expenses
Surplus

Statement of Understanding

The enclosed Event TMRF has been prepared to the best of my ability. It is complete and accurate and I agree to provide ACM with required reports.

If this event is approved by ACM, I agree to comply with ACM financial policies for Chapter Events. I understand that whenever it becomes known that income or expense will vary more than 15% (or the amount of contingency) in any major category of the budget, an amendment must be sent to the Chapter Coordinator at ACM HQ for approval distribution. I will provide a final financial report along with a summary of the events activities as part of the Annual Chapter Report.

I am informed of the ACM policy on free circulation of scientists as it applies to the ACM Resolution on Sponsorship of International Conference of 25 May 1975 and of the spirit and intent of the relevant Resolution on the Free Circulation of Scientists of the International Council of Scientific Unions. I know of no aspect of the proposed meeting which is contrary to this intent.

I accept full responsibility and liability if I fail to comply with the ACM policies and procedures.

Event Chair Signature

Member Number

Date

Event Treasurer Signature

Member Number

Date

For Co-Sponsored Conferences
HOLD HARMLESS CLAUSE AND STATEMENT OF UNDERSTANDING
BETWEEN
THE ASSOCIATION FOR COMPUTING MACHINERY, INC.
(hereafter known as "ACM")
and

The _____
(Name of Conference)

(Date of Conference)

(Location of Conference)

hereafter known as the "Conference", and
The _____
(Name of Sponsor)

(Address)

hereafter known as the "Sponsor(s)."

The Sponsor(s) assumes entire responsibility for the legal and financial liabilities associated with the above named Conference.

The Sponsor(s) agree to hold harmless and indemnify ACM, its directors, officers, employees, agents, and assigns from and against any and all liability, loss, requests for payment, damages to persons and property including loss of use thereof as well as fines and penalties imposed by any governmental or regulatory authority and reasonable attorneys fees and disbursements in connection with the above captioned event.

In addition, the Sponsor(s) acknowledges that ACM does not maintain insurance covering the Sponsors and it is the sole responsibility of the Sponsor(s) to obtain comprehensive General Liability and Contractual Liability insurance to insure losses or casualties associated with the Conference.

The Sponsor(s) also acknowledge that there is a financial risk involved with sponsoring the Conference, and that the Sponsor(s) alone shall bear the burden of financial loss to the Conference.

I certify that I am an agent for the sponsoring organization and have the authority to make legal commitments for the organization.

For _____ Date _____
(Name of Organization)

By _____ Signature _____
(Print Name)