



Student Activities Office Music Waiver Form

It is the policy of The College of New Jersey and the Brower Student Center that all requests for music to be played in the Student Center.

ORGANIZATION/DEPARTMENT INFORMATION:

Name of Organization/Department: _____

Name of Organization/Department Representative: _____

Phone Number: _____ Email: _____

TABLE/ EVENT INFORMATION:

Date(s) of Vendor Table/Event:

Reason for Music Being Played (please be descriptive):

I am fully aware that volume of the music played cannot exceed 70 decibels. I understand that by signing this waiver I will assume full responsibility of all activities involving the use of music for this particular event.

Organization Event Coordinator: _____ Date: _____

Organization Faculty/Staff Advisor: _____ Date: _____
(for student organizations)

Brower Student Center Assistant Manager: _____ Date: _____