



Urbana Champaign Independent Media Center

# Key Privilege Form

Active Membership Info (*Print clearly, please!*):

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail address (required): \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

## UC-IMC Working Group(s) and Affiliated Projects (Check all that apply):

\_\_\_\_\_ I am an active member of or Americorp for an UC-IMC working group. (circle all that apply):  
 Books to Prisoners Finance Print RFU Shows Tech Production Other: \_\_\_\_\_

\_\_\_\_\_ I am a UC-IMC sustaining funder (\$10 monthly minimum) or a lifetime member (\$1000. donation)

\_\_\_\_\_ I am a designated key holder for a group that meets regularly in the UC-IMC Community Center and contributes financially to the overhead. Group: \_\_\_\_\_

\_\_\_\_\_ I am a staff member, keeping the UC-IMC open during public access hours.

\_\_\_\_\_ I am a Bike Project Member

\_\_\_\_\_ I am a tenant.

## Key Privilege Consent (MUST be initialed and signed by member and spoke):

_____	_____	<b>I have attended a key privilege orientation meeting.</b>
Member	Spoke	
_____	_____	<b>I have read and understand UCIMC's key privilege policies.</b>
Member	Spoke	
_____	_____	<b>I agree to abide by UCIMC's key privilege policies.</b>
Member	Spoke	
_____	_____	<b>I have paid a \$20 key deposit.</b>
Member	Spoke	

**x** \_\_\_\_\_ **x** \_\_\_\_\_

Member Signature Working Group Spoke Signature

(To be completed by IMC staff only)

Key deposit received: \$ \_\_\_\_\_ by: [ ] Cash [ ] Check # \_\_\_\_\_ Date: \_\_\_\_\_

Date entered into QB: \_\_\_\_\_ Initials: \_\_\_\_\_

<b>UCIMC Key Privilege Policy Agreement:</b>
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*Please initial the following:*

1. \_\_\_\_\_ I agree that my access to this building is for purposes that share the IMC's mission, i.e., art and media production, distribution and education, or a specific project which may require me to be in the building after hours.
2. \_\_\_\_\_ I agree that it is my responsibility to make sure that the building is secure when I leave the premise. This means:
  1. Cleaning up any area that I or others with me have used
  2. Locking any doors I have opened
  3. If I am the last key-holder to leave, I will lock up properly and making sure that all others have left the building before I leave.
3. \_\_\_\_\_ I agree to report any problems or suspicious behavior to the building manager or building staff immediately. This includes, but is not limited to, the use of alcohol or drugs on the premises, any illegal activities, people sleeping in the IMC, etc.
4. \_\_\_\_\_ I agree to respect the building, the artwork housed inside and outside, and all IMC property. If I witness any damage either on my part or on the part of another person, I agree to notify building staff and take appropriate measures to repair damage.
5. \_\_\_\_\_ I agree to reserve and pay for space for any regular or scheduled event.
6. \_\_\_\_\_ I will not give my key to another person.
7. \_\_\_\_\_ I will not duplicate my key.
8. \_\_\_\_\_ I will notify the UCIMC if my key has been lost or stolen. By notifying the UCIMC immediately, members who have lost keys will not be responsible for the cost of changing the locks.
9. \_\_\_\_\_ If I am receiving this key as a member of a UCIMC working group, I agree to keep my UCIMC and associated memberships current, and should it lapse, I agree to return my key immediately and forfeit my key privilege.
10. \_\_\_\_\_ I understand that if my key privilege is abused, I will be asked to return my key and will forfeit my key deposit. Additionally, if misuse of my key privileges results in the need to change the locks associated with my key, I agree that the IMC retains the right to change the locks and hold me liable for any fees associated with doing so.
11. \_\_\_\_\_ I agree my key deposit will only be returned to me when I return the key itself. Lost or unreturned keys will result in loss of my deposit.