



UNIVERSITEIT VAN PRETORIA  
UNIVERSITY OF PRETORIA  
YUNIBESITHI YA PRETORIA

## TERMS AND CONDITIONS FOR USE OF THE ADVANCED SURGICAL PROCEDURES SKILLS LABORATORY

**Name of Event:**

**Date of Event:**

**Contact Person:**

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### **The Facility:**

Please note that the Lab is situated in an academic complex within a university campus where teaching and learning takes place and must be respected as such.

The lab is equipped with:

- 6 stainless steel learner stations with examination lights
- 1 stainless steel teacher station with examination lights
- Tables and lab stools
- Water facilities for saline/fluid for client's equipment is available
- Waste disposal according to regulations
- AV equipment and support is available upon request at an additional cost
- Lecture and boardroom facilities are available at an additional cost
- Weekend courses require additional security at an additional cost
- Weekend courses require additional cleaning at an additional cost
- Printing or photocopy service available at an additional cost
- Catering should be booked through Crisp Café 083 254 0847 well in advance
- Outside the Lab is space for delegates to relax and check their e-mails.
- Shower and locker facilities available.

### **Reservations, orders and payment**

- Reservations are done through the event application form and must be received at least **21 days** prior to the proposed date of the planned event.
- Ordering of specimens need to be made from the Lab Manager, at least **30 days** prior to the event to determine availability.
- The supply of specimens is dependent on the sourcing of suitable bodies and cannot be guaranteed
- In the event of the cancellation of a booking or specimens the following will apply:
  - 100% of full account is payable if cancellation is done 72 hours before commencement.
  - 75% cancellation fee when cancelling 5 days or less, prior to booking.
  - 50% cancellation fee, when cancelling 10 days or less, prior to booking.

## **Deposit**

The Faculty of Health Sciences will require an official purchase order number and the account must be paid seven (7) days prior to the event.

## **Banking details**

Bank: Absa Bank Limited

Account name: University of Pretoria

Branch Code: 632005

Type of Account: Cheque Account

Account No: 40 9208 8040

Swift code: ABSAZAJJ

## **Invoice**

Final invoice might differ from the Pro-Forma Invoice/Quotation.

## **Additional charges**

All additional charges during the event will be debited to your account and should be settled the day after the final invoice has been sent.

## **Lab rules:**

- No eating or drinking allowed inside the Lab
- Relevant PPE is to be worn
- No furniture or equipment may be removed from the Lab area or moved from other departments within the building without the express permission of the Lab Manager.
- The Lab facilitates a **maximum of 25 people**. Due to Occupational Health and Safety risks, we cannot accommodate any more people. This includes sponsors.
- Setup/breakdown times are to be arranged in advance with the Lab Manager and equipment and instrument sets must to be removed after the event
- Programme times must be adhere to avoid penalty charges.
- No consumables, PPE, instruments or equipment will be supplied by the Lab.
- A basic first aid kit is available on site.

**Access to the campus and parking:**

- A list of attendees must be received by e-mail at least **7 working days before the event** to arrange access to the premises and to secure parking. A maximum of 10 vehicles are allowed on campus during the week and 30 over weekends.
- Please do not obstruct lift doors while delivering equipment or consumables this may damage the time delay on the system.
- No loitering on other levels/buildings or in other departments

**GENERAL**

**DAMAGES**

The Client will be held responsible for any loss/damage to equipment/premises by the client or the client guests, for the duration of the event.

All property and possessions brought onto our premises are done so, at the sole risk of the owners thereof. We shall not be liable for any cause whatsoever, for any injury, loss or damage caused to persons or property, except if that injury, loss or damage is caused directly and solely as a result of our negligence.

*Please note that the BMS building is a NON SMOKING FACILITY.*

Undertaking by Applicant:

I hereby accept and agree to the Terms and Conditions applicable to the use of University facilities. I accept full responsibility on behalf of the body stated above for the orderly progress of the event and for any damage to property that may occur.

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Name and Surname:

Applicant

Signature Applicant

Date:



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**EVENT APPLICATION FORM: ADVANCED SURGICAL PROCEDURES  
 SKILLS LABORATORY, ROOM 5-24, BMS BUILDING, PRINSHOF  
 CAMPUS**

**PLEASE NOTE:**  
 To be submitted **21 days before the event** to Anya König ([anya.konig@up.ac.za](mailto:anya.konig@up.ac.za)) and approval received before invitations are sent out.  
 All applications to be accompanied by a **scope document/programme**.  
 Ordering of specimens need to be made at least **30 days** prior to the event  
 Bookings or availability of the venue(s) does not constitute approval of the event.

**EVENT DETAILS:**

Name of the event:		
Brief description of the event:		
Date of the event:		
Time of the event	Start:	End:
Estimated of number of attendants/guests. Max is 25	UP members:	Non-UP members:
Are any sponsors involved in the event?	YES:	NO:
If 'YES', please attach a list of all sponsors		

**FACILITIES REQUIRED [mark with x]**

Advance Surgical Procedures Lab	<input type="checkbox"/>	Date: Time: From ..... until
Lecture Hall This service is available at an additional cost	<input type="checkbox"/>	Date: Time: From ..... until
Audio-visual equipment This service is available at an additional cost	<input type="checkbox"/>	Date: Time: From ..... until
<i>All audio-visual requirements are to be booked beforehand to <a href="mailto:help@it.up.ac.za">help@it.up.ac.za</a> or IT Catalogue on UP Portal for internal staff.</i>		
Catering Please contact Patrick from Crisp @ 0832540847	<input type="checkbox"/>	Date: Time: From ..... until

Catering to be provided by	
<i>If an external caterer is used, proof that the caterer is in possession of a catering licence or a certificate of acceptability for food premises, issued by the City of Tshwane, must be provided</i>	

Will alcohol be served /sold at the event?	YES:	NO:
<i>If so, the Application for alcohol beverages must also be completed.</i>		

**DO YOU REQUIRE:**

Parking: <b>Max number is 15 and a name list with vehicle details to be attached</b>	YES:	NO:
Parking arranged with:		

Security: <b>Weekend events require additional security at an additional cost</b>	YES:	NO:
Security quotation to be arranged with Mr Chris Colyn at <a href="mailto:chris.colyn@up.ac.za">chris.colyn@up.ac.za</a>		

I have familiarised myself with terms and conditions applicable to the use of the University of Pretoria's facilities and the fresh frozen specimens and I accept full responsibility for the orderly progress of the event and for any damage that may occur.

Name and Surname of Event Applicant:	
Designation:	
Contact telephone:	
Email address:	
DATE:	SIGNATURE:

Name and Surname of person responsible for payment of Event:	
Designation:	
Contact telephone:	
Email address:	
DATE:	SIGNATURE:

Comments by Dean or Faculty Manager:	
Name:	
Contact telephone:	
Email address:	
DATE:	SIGNATURE: