

Free Speech Area Registration Form

(Please Print)	
Individual or Organization Name:	
Address: Te	lephone:
Detailed Description of Activity:	
Date(s) Requested (M-F only):Time (must be b	etween 8am-5pm)
Dates may not be available due to college events and/or closures.	
Location(s) Requested: Somerset North Campus Somerset South	n Campus Laurel North Campus
Laurel South CampusMcCreary Center Clinton Center Ru	ussell Center Casey Center
SCC Free Speech Area Policy I/we understand that SCC College has the right to restrict the time, place SCC permits free speech activities to the extent that it does not disrupt to designates areas called the "Free Speech Area" on all campuses and cen parameters of each Free Speech Area (locations are identified). I/we fur solicitation and harassment are not acceptable behavior for persons using distribute flyers, pamphlets, petitions, etc. only in the designated Free Spassers-by. Artificial noisemakers or enhancers: i.e. walkie-talkies, stered devices used to create or magnify noise are prohibited. Photographing of Speech Area. Pictures, displays, graphics, etc. may not be used if they prof these to others. All displays must not exceed 24" x 36". No equipment Free Speech Area will be supplied by the College. No food or beverage g Speech Area.	the College's educational purpose. SCC ters. Individuals must remain within the other understand that aggressive ag the Free Speech Areas. I/we may peech Area and only when asked by os, megaphones, speakers, or any other or videotaping is also prohibited in the Free omote hate, harm, violence, or the threat tabove and beyond the location of the
If a non-college unit or group, I/we will give SCC an advance notice of 72 Area. I/we understand that the Free Speech Area may not be available figroup or organization or if being used for academic functions. Additional agree that a confirmation from the Office of Institutional Advancement (Campus.	or use if it has been scheduled by another lly, if a non-college unit or group, I/we also
By signing this form I/we acknowledge that I/we fully accept and unders to abide by the policies and procedures for free speech activities at SCC.	tand the conditions listed here and agree
PRINTED NAME(S) (Of person(s) registering for free speech activities)	DATE
Please return to the Office of Institutional Advancement: 808 Monticel	lo Street, Somerset, KY 42501 or email the
form to <u>cindy.clouse@kctcs.edu</u>	
Official Use Only: (Non-college units or groups) Date received Time received	