

# Event Rental Application and Agreement *for Conference/Banquet Rooms*

## CONTACT INFORMATION

Date of Application \_\_\_\_\_

Name of Group \_\_\_\_\_

Contact Person \_\_\_\_\_

Day Phone (\_\_\_\_) \_\_\_\_\_ Evening Phone (\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street or P.O. Box

City

State

Zip

Person responsible during event \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

## EVENT

Date(s) of Event \_\_\_\_\_ Day(s) of Week \_\_\_\_\_ Type of Event \_\_\_\_\_ # of Guests \_\_\_\_\_

Room(s) Requested (please sel) Conference Room 300 \_\_\_\_\_ Conference Room 306 \_\_\_\_\_ Banquet Room \_\_\_\_\_

Date \_\_\_\_\_ Setup Time \_\_\_\_\_ Event Start Time \_\_\_\_\_ Event End Time \_\_\_\_\_ Cleanup Finished Time \_\_\_\_\_

Date \_\_\_\_\_ Setup Time \_\_\_\_\_ Event Start Time \_\_\_\_\_ Event End Time \_\_\_\_\_ Cleanup Finished Time \_\_\_\_\_

Date \_\_\_\_\_ Setup Time \_\_\_\_\_ Event Start Time \_\_\_\_\_ Event End Time \_\_\_\_\_ Cleanup Finished Time \_\_\_\_\_

Date \_\_\_\_\_ Setup Time \_\_\_\_\_ Event Start Time \_\_\_\_\_ Event End Time \_\_\_\_\_ Cleanup Finished Time \_\_\_\_\_

Date \_\_\_\_\_ Setup Time \_\_\_\_\_ Event Start Time \_\_\_\_\_ Event End Time \_\_\_\_\_ Cleanup Finished Time \_\_\_\_\_

Total Hours \_\_\_\_\_

# of Chairs \_\_\_\_\_ # of Tables \_\_\_\_\_ Types of Table (limited quantities) 5' round, qty \_\_\_\_\_ 6' rectangle, qty \_\_\_\_\_ 8' rectangle, qty \_\_\_\_\_

Keys Arrangements \_\_\_\_\_

Items for an Additional Fee: Cleaning \_\_\_\_\_ Table/Chair Setup and Teardown \_\_\_\_\_ Wireless Internet \_\_\_\_\_ Screen and Projector \_\_\_\_\_

TV and VCR/DVD \_\_\_\_\_ Wired Microphone Package \_\_\_\_\_ Staff to Manage Sound and/or Projector \_\_\_\_\_

By signing below I certify I have read the **Rental Guide** and **Rental Application and Agreement** and agree to all policies, terms of use and guidelines. I realize my failure to comply may necessitate cancellation of my reservation. I also understand that my organization will be held financially responsible for damage of equipment or facility due to negligence or misuse. I understand that our deposit may be held to cover damages and that we may be billed for damages which extend beyond the deposit amount. I further understand that our deposit may be used to cover additional rental time if our actual use of the Center Point facility extends beyond our originally scheduled event. We will be charged for the time we setup for our event, the event itself, and for the time used to clean if we have opted to clean the facility ourselves.

\_\_\_\_\_  
Renter's Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

## OFFICE USE ONLY

Rental Fee \$ \_\_\_\_\_ Room #1: \$ \_\_\_\_\_ rate x \_\_\_\_\_ hrs = \$ \_\_\_\_\_; \$ \_\_\_\_\_ rate x \_\_\_\_\_ hrs = \$ \_\_\_\_\_

Room #2: \$ \_\_\_\_\_ rate x \_\_\_\_\_ hrs = \$ \_\_\_\_\_; \$ \_\_\_\_\_ rate x \_\_\_\_\_ hrs = \$ \_\_\_\_\_

Room #3: \$ \_\_\_\_\_ rate x \_\_\_\_\_ hrs = \$ \_\_\_\_\_; \$ \_\_\_\_\_ rate x \_\_\_\_\_ hrs = \$ \_\_\_\_\_

Due at Reservation \$ \_\_\_\_\_ Date Paid \_\_\_\_\_ Receipt # \_\_\_\_\_ Date submitted to Treasurer \_\_\_\_\_

Damage Deposit (refundable) \$ \_\_\_\_\_

Cleaning Fee (potentially refundable) \$ \_\_\_\_\_

Table/Chair Setup and Teardown Fee (optional) \$ \_\_\_\_\_

Wired Microphone Package Fee (optional) \$ \_\_\_\_\_

TV/VCR/DVD or Screen/Projector Fees (optional) \$ \_\_\_\_\_

Equipment Deposit (required, if renting equipment) \$ \_\_\_\_\_

Wireless Internet Fee (optional) \$ \_\_\_\_\_

Staff to manage microphones or projector (optional) \$ \_\_\_\_\_

Due 30 Days Prior to Event \$ \_\_\_\_\_ Date Paid \_\_\_\_\_ Receipt # \_\_\_\_\_ Date submitted to Treasurer \_\_\_\_\_

Total Cost \$ \_\_\_\_\_

Insurance needed? Yes \_\_\_\_\_ No \_\_\_\_\_ Certificate of Liability Insurance evidence received? \_\_\_\_\_ Non-profit evidence needed? Yes \_\_\_\_\_ No \_\_\_\_\_ Received? \_\_\_\_\_

Meadow Glade Seventh-day Adventist Church member \_\_\_\_\_ Oregon Conference of Seventh-day Adventists member \_\_\_\_\_ Current Center Point tenant \_\_\_\_\_

Event on Center Point calendar? \_\_\_\_\_ Custodian scheduled, if requested? \_\_\_\_\_ Setup/teardown person scheduled? \_\_\_\_\_ Equipment staff scheduled? \_\_\_\_\_

Microphones or other equipment reserved? \_\_\_\_\_ Wireless internet password arranged? \_\_\_\_\_

Keys checked out, Date \_\_\_\_\_ Room(s) prepped, Date \_\_\_\_\_ Room(s) evaluated, Date \_\_\_\_\_ Keys returned, Date \_\_\_\_\_

Cleaning fee and deposits to be refunded \$ \_\_\_\_\_ Date requested from Treasurer \_\_\_\_\_ Date refund paid \_\_\_\_\_

Center Point is a division of the Meadow Glade Seventh-day Adventist Church