

**Parkrose School District #3**

**FREE/REDUCED FACILITY APPLICATION**

**Free**  **Reduced** (Please select one)

(This application is valid for one school year only. You must reapply each year.)

**Organization:** Crossroads Church

**Contact:** David Walmer **Phone:** 503-349-9879

**Date of Application:** 6/7/10 **Date(s) of event:** 8/21/10

**Purpose of Use:** Community Event

**Your organization/event must meet the criteria for 'FREE' by attaching the requested supporting documentation (see criteria below). Also, A FACILITY USE APPLICATION must accompany this form.**

**CRITERIA**

- Your group must directly serve the Parkrose community
- No admission, entry, or other fee will be charged to participants or spectators *charging vendors*
- Attach a copy of your constitution (if applicable)
- Attach a current list of members with addresses (if applicable)

**FEE PROPOSAL**

<u>PHS West Parking Lot</u>	<u>\$450<sup>00</sup></u>	<u>0</u>
<i>Requested Facility</i>	<i>Facility Fee</i>	<i>Proposed Reduced or Free Facility Fee</i>
<u>Bus</u>		
<u>PMS Drive-Up for Donation</u>	<u>\$450<sup>00</sup></u>	<u>0</u>
<i>Requested Facility</i>	<i>Facility Fee</i>	<i>Proposed Reduced or Free Facility Fee</i>
<u>Food</u>		
<u>Prog. off</u>		

450<sup>00</sup> total

**Additional Conditions or Terms (if applicable):**

**History of Facility Use with Parkrose School District:**

This section to be completed by PSD staff:

*Reduce fee of \$450.00 for HS only. full charge on MS*

Approved  Denied

*Ana L. Gomez*  
*Building Principal/Designee*

Date Range:

*8/21/10*

*Karen Gray*  
*Superintendent Signature*

Date

*6/28/10*

Superintendent Recommendation & Comments:

*Rec. Approval.*

**BOARD ACTION:**

Approved  Denied

Date \_\_\_\_\_

**PARKROSE HIGH SCHOOL FACILITIES USE APPLICATION**

**"Parkrose Community Groups/Non-Profit Organizations"**

Parkrose High School & Community Center - 12003 NE Shaver Street - Portland, Oregon 97220 - Fax (503) 408-2739

Today's Date: 6-7-2010

*For PHS Office Use Only*  
 Approved  Declined: \_\_\_\_\_

Organization CROSSROADS CHURCH Non-Profit Tax ID # 930515766  
 Contact DAVID WALMER Phone 503-349-9879 Cell \_\_\_\_\_  
 Address 2505 NE 102<sup>ND</sup> AVE City PORTLAND State OR Zip 97220

Date(s)	Day of week	Facility	Access Time - Exit Time	Expected Attendance
8-21	SATURDAY	WEST PARKING LOT	8 AM - 5 PM	1000

*BUS DRIVE THRU AT PMS.*

**FACILITY FEES:**

- |   |  |  |                             |
|---|--|--|-----------------------------|
| <input type="checkbox"/> Student Center (4hrs)              | \$200.00 x _____ = \$ _____            | <input type="checkbox"/> Gym (2hrs)                    | \$ 50.00 x _____ = \$ _____ |
| <input type="checkbox"/> Kitchen (4hrs)*                    | \$200.00 x _____ = \$ _____            | <input type="checkbox"/> Wrestling Rm (4hrs)           | \$ 25.00 x _____ = \$ _____ |
| <input type="checkbox"/> Community Rooms (4hrs)             | \$ 50.00 x _____ = \$ _____            | <input type="checkbox"/> Dance Room (4hrs)             | \$ 25.00 x _____ = \$ _____ |
| <input type="checkbox"/> Student Courtyard (4hrs)           | \$100.00 x _____ = \$ _____            | <input type="checkbox"/> Locker Room (each/4hrs)       | \$ 25.00 x _____ = \$ _____ |
| <input type="checkbox"/> Band Room (4hrs)                   | \$ 50.00 x _____ = \$ _____            | <input type="checkbox"/> Tennis Courts (4 courts/2hrs) | \$ 50.00 x _____ = \$ _____ |
| <input type="checkbox"/> Choir Room (4hrs)                  | \$ 25.00 x _____ = \$ _____            | <input type="checkbox"/> Track (p/hr)                  | \$ 50.00 x _____ = \$ _____ |
| <input type="checkbox"/> Classroom (4hrs)                   | \$ 25.00 x _____ = \$ _____            | <input type="checkbox"/> Football Field (2hrs)         | \$ 50.00 x _____ = \$ _____ |
| <input type="checkbox"/> Library (p/hr)                     | \$ 50.00 x _____ = \$ _____            | <input type="checkbox"/> Baseball Field (2hrs)         | \$ 50.00 x _____ = \$ _____ |
| <input checked="" type="checkbox"/> West Parking Lot (4hrs) | \$150.00 x <u>3</u> = \$ <u>450.00</u> | <input type="checkbox"/> Soccer Field (2hrs)           | \$ 50.00 x _____ = \$ _____ |
| <input type="checkbox"/> Pool (up to 25 people/ 2hrs)       | \$100.00 x _____ = \$ _____            | <input type="checkbox"/> Softball Field (2hrs)         | \$ 50.00 x _____ = \$ _____ |
| <input type="checkbox"/> Pool (swim meet/ 2hrs)             | \$300.00 x _____ = \$ _____            |  |                             |

\*Parkrose School District Food Service Staff will be scheduled for all Kitchen use at \$ 25.00 p/hr.

\*\*Facilities are charged based on units above. PHSCC will not invoice on the half, quarter, or partial units.

**EQUIPMENT FEES:**

- |   |                          |   |                          |
|---|--------------------------|---|--------------------------|
| <input type="checkbox"/> Podium             | \$ 5.00 x _____ = _____  | <input type="checkbox"/> Gym Floor Cover                        | \$200.00 x _____ = _____ |
| <input type="checkbox"/> Microphone         | \$ 10.00 x _____ = _____ | <input type="checkbox"/> Field Lights (per hr)                  | \$ 50.00 x _____ = _____ |
| <input type="checkbox"/> In-Focus           | \$ 50.00 x _____ = _____ | <input type="checkbox"/> Volleyball Net (3 nets/p use)          | \$ 50.00 x _____ = _____ |
| <input type="checkbox"/> TV/VCR/DVD         | \$ 10.00 x _____ = _____ | <input type="checkbox"/> Scoreboard                             | \$ 25.00 x _____ = _____ |
| <input type="checkbox"/> Overhead Projector | \$ 5.00 x _____ = _____  | <input type="checkbox"/> Swim Scoreboard (p/use)                | \$100.00 x _____ = _____ |
| <input type="checkbox"/> Choral Risers      | \$100.00 x _____ = _____ | <input type="checkbox"/> Bleachers (1 side)                     | \$ 50.00 x _____ = _____ |
| <input type="checkbox"/> Sound System       | \$ 25.00 x _____ = _____ | <input type="checkbox"/> Lining Baseball Field                  | \$ 50.00 x _____ = _____ |
| <input type="checkbox"/> Chairs (p/chair)   | \$ 1.00 x _____ = _____  | <input type="checkbox"/> Initial Set up & Lining Soccer Field   | \$250.00 x _____ = _____ |
| <input type="checkbox"/> Tables (p/table)   | \$ 5.00 x _____ = _____  | <input type="checkbox"/> Lining Soccer Field (maintenance)      | \$100.00 x _____ = _____ |
|   |                          | <input type="checkbox"/> Initial Set up & Lining Football Field | \$575.00 x _____ = _____ |
|   |                          | <input type="checkbox"/> Lining Football Field (maintenance)    | \$100.00 x _____ = _____ |

**CATERING/FOOD REQUIRMENTS**

- ◆ All Catering must be contracted by Parkrose Food Service (503-408-2122), or one of our Preferred Caterers.
- ◆ If you are not using Parkrose Food Service, you are required to choose from our list of Preferred Caterers, which may be provided to you upon request (503-408-2697). Additionally, a Parkrose Food Service employee will be required for all kitchen use at a rate of \$25.00 p/hr.
- ◆ All food must be consumed/served in the PHSCC Student Center and will be added to your contract and invoice.

**THEATER RENTALS:**

Date(s)	Day(s) of week	PACKAGE(s)	Access Time - Exit Time	Expected Attendance

**THEATER PACKAGES & FEES:**

**PACKAGE "A"**

This package includes: Stage to mid-stage curtain (26' of depth), use of front curtain, up to 4 microphones, 4 stage monitor speakers, house CD player(s), up to 8 standard lighting cues, 1 A/V component set-up, theater supervisor w/1 crew member.

4 Hours \$ 750.00 x \_\_\_\_\_ = \$ \_\_\_\_\_  Additional Hour beyond 4 \$ 200.00 x \_\_\_\_\_ = \$ \_\_\_\_\_  
 8 Hours \$ 1100.00 x \_\_\_\_\_ = \$ \_\_\_\_\_  Additional Hour beyond 8 \$ 250.00 x \_\_\_\_\_ = \$ \_\_\_\_\_

**PACKAGE "B"**

This package includes: All of Package "A", full stage to up-stage curtain (44' of depth), up to 4 additional microphones (8 total), up to 24 standard lighting cues, up to 3 rigging moves, access to dressing/make-up rooms, theater supervisor w/2 crew members.

8 Hours \$ 1225.00 x \_\_\_\_\_ = \$ \_\_\_\_\_  Additional Hour beyond 8 \$ 275.00 x \_\_\_\_\_ = \$ \_\_\_\_\_

**PACKAGE "C"**

This package includes: All of Packages "A" & "B", full access to lighting and sound system inventories, up to 150 lighting cues, up to 40 sound and/or A/V cues, up to 10 rigging moves, theater supervisor w/3 crew.

8 Hours \$ 1350.00 x \_\_\_\_\_ = \$ \_\_\_\_\_  Additional Hour beyond 8 \$ 300.00 x \_\_\_\_\_ = \$ \_\_\_\_\_

**LOAD-IN / LOAD-OUT PACKAGES**

Load-In / Load Out packages include: The load-in or load-out of your equipment, access to facilities based on above details, theater supervisor. They do not include PHSCC equipment operation or cueing.

4 Hours \$ 500.00 x \_\_\_\_\_ = \$ \_\_\_\_\_  
 8 Hours \$ 750.00 x \_\_\_\_\_ = \$ \_\_\_\_\_

**ADDITIONAL THEATER EQUIPMENT FEES:**

<input type="checkbox"/> Row of Seat Removal & Reinstall	\$200.00 x _____ = _____	<input type="checkbox"/> Dance Floor	\$350.00 x _____ = _____
<input type="checkbox"/> Orchestra Pit - Removal & Reinstall	\$350.00 x _____ = _____	<input type="checkbox"/> Choral Risers	\$100.00 x _____ = _____
<input type="checkbox"/> Vocal/Instrumental Microphone	\$ 7.50 x _____ = _____	<input type="checkbox"/> Projection Screen	\$ 25.00 x _____ = _____
<input type="checkbox"/> Wireless Microphone	\$ 50.00 x _____ = _____	<input type="checkbox"/> Music Stands (p/stand)	\$ 2.50 x _____ = _____
<input type="checkbox"/> Grand Piano (w/standard tuning)	\$200.00 x _____ = _____	<input type="checkbox"/> Video Projector	\$150.00 x _____ = _____

- ◆ Additional Stagehand(s) may be added at a rate of \$40.00 each per 1/2 day (max of 4 hours), and \$70.00 each per full day (max of 8 hours).
- ◆ NOTE: Stagehands are paid based on 4-hour minimum calls. After 8 hours of a regular day, crews are paid time and a half. A 1-hour meal break is required after each 4-hour work period. For each meal break missed, a \$30.00 p/crew member penalty will be assessed and billed.
- ◆ Please communicate with Terry Franceschi (503-408-2715), PHSCC Theater Operations Manager, prior to selecting your package(s).

**CUSTODIAL FEES:**

- ◆ Monday - Friday, operating hours = \$28.00 p/hour
- ◆ Saturdays - 7:30am-3:00pm = \$28.00 p/hour
- ◆ Sundays - all hours & after operating hours = \$35.00 p/hour

**\*\*When renting the THEATRE, Custodial Fees are included in the Theater package price (excluding Sundays)**

**Facilities Coordinator will complete this section:**

\$28.00 x number of hours needed \_\_\_\_\_ = \$ \_\_\_\_\_  
 \$35.00 x number of hours needed \_\_\_\_\_ = \$ \_\_\_\_\_

- FACILITY FEES	\$ <u>450.00</u>
- EQUIPMENT FEES	\$ _____
- THEATER FEES	\$ _____
- CUSTODIAL FEES	\$ _____
<b>TOTAL RENTAL FEES</b>	<b>\$ <u>450.00</u></b>

*A 30% non-refundable deposit is required to secure your reservation.  
 FULL PAYMENT IS DUE - 2 WEEKS PRIOR TO RENTAL DATE*

Completed by: Sandra Jackson DATE 6/21/10  
 PHSCC Facilities Coordinator

I/we understand the above fees. If my application is accepted for the requested facility scheduled at PHSCC, we agree to meet all contractual, insurance, deposit and payment requirements during the agreement period. I/we agree to be responsible for the conduct of the audience in and about the building and for any damages beyond ordinary wear and tear, which occurs to this District property in regards to our use and occupancy thereof. I/we agree that District property will be used in accordance with the rules and regulations of the Board of Educations (See Policy KGAA).

Client Signature [Signature] Date 6-8-2010

# PARKROSE MIDDLE SCHOOL - FACILITIES USE APPLICATION

## "Parkrose Community Groups/Non-Profit Organizations"

Parkrose Middle School - 11800 NE Shaver Street - Portland, Oregon 97220 - Fax (503) 408-2998

Today's Date: 6/7/10

*For PMS Office Use Only*  
 Approved  Declined

Organization: Crossroads Church Non-Profit Tax ID # 930515760

Contact: David Walmer Phone 503-349-9879 Cell \_\_\_\_\_

Address: 2505 NE 102nd Ave. City Portland State OR Zip 97220

Date(s)	Day of week	Facility	Access Time - Exit Time	Expected Attendance
<u>8/21</u>	<u>Saturday</u>	<u>Parking Lot (Bus Drive-Thru)</u>	<u>8am - 5pm</u>	

**FACILITY FEES:**

- |  |  |  |                             |
|--|--|--|-----------------------------|
| <input type="checkbox"/> Classroom (4hrs)              | \$ 25.00 x _____ = \$ _____            | <input type="checkbox"/> Main Gym (2hrs)       | \$ 25.00 x _____ = \$ _____ |
| <input type="checkbox"/> Cafeteria (4hrs)              | \$100.00 x _____ = \$ _____            | <input type="checkbox"/> Small Gym (2hrs)      | \$ 12.50 x _____ = \$ _____ |
| <input type="checkbox"/> Stage (4hrs**)                | \$100.00 x _____ = \$ _____            | <input type="checkbox"/> Main Field (2hrs)     | \$ 25.00 x _____ = \$ _____ |
| <input type="checkbox"/> Kitchen (4hrs)*               | \$100.00 x _____ = \$ _____            | <input type="checkbox"/> Baseball Field (2hrs) | \$ 25.00 x _____ = \$ _____ |
| <input checked="" type="checkbox"/> Parking Lot (4hrs) | \$150.00 x <u>3</u> = \$ <u>450.00</u> | <input type="checkbox"/> Track (p/hr)          | \$ 25.00 x _____ = \$ _____ |
| <input type="checkbox"/> Locker Room (each/4hr)        | \$ 12.50 x _____ = \$ _____            | <input type="checkbox"/> Wrestling Rm (4hrs)   | \$ 12.50 x _____ = \$ _____ |
| <input type="checkbox"/> Tennis Courts (4cts/2hrs)     | \$ 25.00 x _____ = \$ _____            |  |                             |

\*Parkrose School District Food Service Staff will be scheduled for all Kitchen use at \$ 25.00 p/hr.

\*\*When renting the Stage, Cafeteria fees apply.

\*\*\*Facilities are charged based on units above. PSD will not invoice on the half, quarter, or partial units.

**EQUIPMENT FEES:**

- |   |                             |   |                              |
|---|-----------------------------|---|------------------------------|
| <input type="checkbox"/> Podium             | \$ 5.00 x _____ = \$ _____  | <input type="checkbox"/> Lining Baseball Field                  | \$ 50.00 x _____ = \$ _____  |
| <input type="checkbox"/> Microphone         | \$ 5.00 x _____ = \$ _____  | <input type="checkbox"/> Initial Set up & Lining Soccer Field   | \$ 250.00 x _____ = \$ _____ |
| <input type="checkbox"/> TV/VCR/DVD         | \$ 10.00 x _____ = \$ _____ | <input type="checkbox"/> Lining Soccer Field (maintenance)      | \$ 100.00 x _____ = \$ _____ |
| <input type="checkbox"/> Overhead Projector | \$ 5.00 x _____ = \$ _____  | <input type="checkbox"/> Initial Set up & Lining Football Field | \$ 575.00 x _____ = \$ _____ |
| <input type="checkbox"/> Sound System       | \$ 25.00 x _____ = \$ _____ | <input type="checkbox"/> Lining Football Field (maintenance)    | \$ 100.00 x _____ = \$ _____ |
| <input type="checkbox"/> Piano              | \$ 25.00 x _____ = \$ _____ |   |                              |
| <input type="checkbox"/> Chairs (per chair) | \$ 1.00 x _____ = \$ _____  |   |                              |
| <input type="checkbox"/> Tables (per table) | \$ 5.00 x _____ = \$ _____  |   |                              |

**CUSTODIAL FEES:**

- ◆ Monday - Friday, operating hours = \$28.00 p/hour
- ◆ Saturdays & Sundays - all hours & after operating hours = \$35.00 p/hour

Facilities Coordinator will complete this section:

\$28.00 x number of hours needed \_\_\_\_\_ = \$ \_\_\_\_\_

\$35.00 x number of hours needed \_\_\_\_\_ = \$ \_\_\_\_\_

- FACILITY FEES	\$ <u>450.00</u>
- EQUIPMENT FEES	\$ _____
- CUSTODIAL FEES	\$ _____
<b>TOTAL RENTAL FEES</b>	<b>\$ <u>450.00</u></b>

*A 30% non-refundable deposit is required to secure your reservation.  
 FULL PAYMENT IS DUE - 2 WEEKS PRIOR TO RENTAL DATE*

Completed by: Sandra Jackson DATE 6/21/10  
 Facilities Coordinator

I/we understand the above fees. If my application is accepted for the requested facility scheduled at Parkrose Middle School, we agree to meet all contractual, insurance, deposit and payment requirements during the agreement period. I/we agree to be responsible for the conduct of the audience in and about the building and for any damages beyond ordinary wear and tear, which occurs to this District property in regards to our use and occupancy thereof. I/we agree that District property will be used in accordance with the rules and regulations of the Board of Educations (See Policy KGAA).

Client Signature \_\_\_\_\_ Date \_\_\_\_\_

• INDIVIDUALS OR ORGANIZATIONS REQUIRED TO PAY FOR THE USE OF SCHOOL FACILITIES UNDER Board Policy 9.12.2 MUST COMPLETE THE Hold Harmless STATEMENT AND MAY BE REQUIRED TO VERIFY INSURANCE COVERAGE BEFORE FINAL AUTHORIZATION IS GRANTED

**HOLD HARMLESS AGREEMENT**

Organization Name Here: Parkrose Ministry Network agrees to indemnify, hold harmless and defend the District, its board members, agents, employees and volunteers from and against any and all liabilities, damages, actions, costs, losses, claims and expenses (including attorney fees), on account of personal injury, death or damage to or loss of property or profits arising out of or resulting in whole or in part from any act, omission, negligence, fault or violation of law or ordinance by "Organization" or "Organization's" employees, agents, volunteers, subcontractors, speakers, exhibitors, event participants or invitees or any other person entering upon the premises with the implied or express permission of "Organization". Such indemnification by "Organization" shall apply unless such damage or injury results from the sole negligence or willful misconduct of the District.

[Signature] \_\_\_\_\_ Date 6/18/10

**INSURANCE REQUIREMENTS**

Commercial General Liability insurance endorsement providing coverage against claims for bodily injury or death and property damage occurring in or upon or resulting from the facilities licensed hereunder, such insurance to offer immediate protection to the limit of no less than \$500,000 and such insurance shall include Blanket Contractual Liability coverage which insures contractual liability under the indemnification of the Parkrose School District #3 and PHSCC by Licensee as set forth below.

1. Licensee shall maintain a policy endorsed to include the Parkrose School District, Parkrose High School, school board members, agents, employees and volunteers as additional insured's as respects to the Organization's use of District facilities. Said insurance must be primary to and non-contributory with any insurance carried by the District and include waiver of subrogation in favor of the District, its board members, agents, employees and volunteers.
2. Licensee agrees to provide all required certificates of insurance to the PHSCC Facility Coordinator at least fifteen (15) calendar days prior to the time of occupancy.
3. The parties agree that the specified coverage of limits if insurance in no way limit the liability of the licensee.
4. Licensee shall provide a Certificate of Insurance containing a notice of cancellation clause not less than 30 days prior to cancellation or non-renewal of any such policy.

**LAWS-RULES-REGULATIONS**

1. All agents and employees connected with Licensee's use of the facility shall abide by, conform to and comply with all laws of the United States and the State of Oregon and all ordinances of the City of Portland, Oregon, and the rules and regulations of PHSCC, together with all rules and regulations of the Bureau of Police of the City of Portland.
2. THE USE OF ALL TOBACCO, ALCOHOLIC BEVERAGES AND CONTROLLED SUBSTANCES ARE STRICTLY PROHIBITED IN OR ON PHSCC PROPERTY.
3. All security services including peer group security desired by Licensee shall be arranged for by special agreement with the PHSCC Facility Coordinator and shall be paid for by the Licensee.
4. The Parkrose High School shall have the sole right to collect and have custody of articles left in the building.
5. Any decision affecting any matter not herein expressly provided for shall rest solely within the discretion of the PHSCC Facility Coordinator.
6. Facility Coordinator must approve all proposed concession and souvenir items prior to licensee's use. Only Coca-Cola products may be served on the PHSCC premises.

WE AGREE AND UNDERSTAND ALL OF THE ABOVE. WE AGREE THAT SAID SCHOOL PROPERTY WILL BE USED IN ACCORDANCE WITH THE RULES AND REGULATIONS OF THE BOARD OF EDUCATION.

Organization or Individual [Signature] Position of Responsibility ORGANIZER - BOARD MEMBER  
Address 2505 NE 100th Ave City Portland State OR Zip 97220

APPROVED FOR USE [Signature] Building Principal TOTAL RENTAL FEES \$ \_\_\_\_\_

• FULL PAYMENT MUST BE RECEIVED, PRIOR TO THE USE OF THE FACILITY