

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: _____

For PHS Office Use Only☐ Approved ☐ Declined: _____

Organization _____ Non-Profit Tax ID # _____

Contact _____ Phone _____ Cell _____

Address _____ City _____ State _____ Zip _____

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

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 type="checkbox"/> West Parking Lot (4hrs)	\$150.00 x ____ = \$ ____	<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 REQUIREMENTS

♦ 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 ½ 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	\$ _____
- EQUIPMENT FEES	\$ _____
- THEATER FEES	\$ _____
- CUSTODIAL FEES	\$ _____
<i>TOTAL RENTAL FEES</i>	\$ _____
<i>A 30% non-refundable deposit is required to secure your reservation.</i>	
<i>FULL PAYMENT IS DUE – 2 WEEKS PRIOR TO RENTAL DATE</i>	

Completed by: _____ DATE _____
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 _____ 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: _____ 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.

Signed _____ / _____ / _____
Date

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 Organizations 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 _____ **Position of Responsibility** _____
Signature _____ *Title*

Address _____ **City** _____ **State** _____ **Zip** _____

APPROVED FOR USE _____ **TOTAL RENTAL FEES \$** _____
Building Principal

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

PARKROSE HIGH SCHOOL FACILITIES USE APPLICATION

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

Today's Date: _____

For PHS Office Use Only

☐ Approved ☐ Declined: _____

Organization _____ Non-Profit Tax ID # _____

Contact _____ Phone _____ Cell _____

Address _____ City _____ State _____ Zip _____

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

FACILITY FEES:

<input type="checkbox"/> Student Center (4hrs)	\$400.00 x ____ = \$ ____	<input type="checkbox"/> Gym (2hrs)	\$100.00 x ____ = \$ ____
<input type="checkbox"/> Kitchen (4hrs)*	\$400.00 x ____ = \$ ____	<input type="checkbox"/> Wrestling Rm (4hrs)	\$ 50.00 x ____ = \$ ____
<input type="checkbox"/> Community Rooms (4hrs)	\$100.00 x ____ = \$ ____	<input type="checkbox"/> Dance Room (4hrs)	\$ 50.00 x ____ = \$ ____
<input type="checkbox"/> Student Courtyard (4hrs)	\$200.00 x ____ = \$ ____	<input type="checkbox"/> Locker Room (each/4hrs)	\$ 50.00 x ____ = \$ ____
<input type="checkbox"/> Band Room (4hrs)	\$100.00 x ____ = \$ ____	<input type="checkbox"/> Tennis Courts (4 courts/2hrs)	\$100.00 x ____ = \$ ____
<input type="checkbox"/> Choir Room (4hrs)	\$ 50.00 x ____ = \$ ____	<input type="checkbox"/> Track (p/hr)	\$100.00 x ____ = \$ ____
<input type="checkbox"/> Classroom (4hrs)	\$ 50.00 x ____ = \$ ____	<input type="checkbox"/> Football Field (2hrs)	\$100.00 x ____ = \$ ____
<input type="checkbox"/> Library (p/hr)	\$100.00 x ____ = \$ ____	<input type="checkbox"/> Baseball Field (2hrs)	\$100.00 x ____ = \$ ____
<input type="checkbox"/> West Parking Lot (4hrs)	\$300.00 x ____ = \$ ____	<input type="checkbox"/> Soccer Field (2hrs)	\$100.00 x ____ = \$ ____
<input type="checkbox"/> Pool (up to 25 people/ 2hrs)	\$200.00 x ____ = \$ ____	<input type="checkbox"/> Softball Field (2hrs)	\$100.00 x ____ = \$ ____
<input type="checkbox"/> Pool (swim meet 2hrs)	\$600.00 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	\$ 10.00 x ____ = ____	<input type="checkbox"/> Gym Floor Cover	\$400.00 x ____ = ____
<input type="checkbox"/> Microphone	\$ 20.00 x ____ = ____	<input type="checkbox"/> Field Lights (per hr)	\$100.00 x ____ = ____
<input type="checkbox"/> In-Focus	\$100.00 x ____ = ____	<input type="checkbox"/> Volleyball Net (3 nets/p use)	\$100.00 x ____ = ____
<input type="checkbox"/> TV/VCR/DVD	\$ 20.00 x ____ = ____	<input type="checkbox"/> Scoreboard	\$ 50.00 x ____ = ____
<input type="checkbox"/> Overhead Projector	\$ 10.00 x ____ = ____	<input type="checkbox"/> Swim Scoreboard (p/use)	\$200.00 x ____ = ____
<input type="checkbox"/> Choral Risers	\$200.00 x ____ = ____	<input type="checkbox"/> Bleachers (1 side)	\$100.00 x ____ = ____
<input type="checkbox"/> Sound System	\$ 50.00 x ____ = ____	<input type="checkbox"/> Lining Baseball Field	\$100.00 x ____ = ____
<input type="checkbox"/> Chairs (p/chair)	\$ 2.00 x ____ = ____	<input type="checkbox"/> Initial Set up & Lining Soccer Field	\$250.00 x ____ = ____
<input type="checkbox"/> Tables (p/table)	\$ 10.00 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 REQUIREMENTS

♦ 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 \$ 825.00 x _____ = \$ _____ ☐ Additional Hour beyond 4 \$ 225.00 x _____ = \$ _____
☐ 8 Hours \$ 1175.00 x _____ = \$ _____ ☐ Additional Hour beyond 8 \$ 275.00 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 \$ 1400.00 x _____ = \$ _____ ☐ Additional Hour beyond 8 \$ 300.00 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 \$ 1550.00 x _____ = \$ _____ ☐ Additional Hour beyond 8 \$ 325.00 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 \$ 550.00 x _____ = \$ _____
☐ 8 Hours \$ 850.00 x _____ = \$ _____

ADDITIONAL THEATER EQUIPMENT FEES:

<input type="checkbox"/> Row of Seat Removal & Reinstall	\$250.00 x _____ = _____	<input type="checkbox"/> Dance Floor	\$500.00 x _____ = _____
<input type="checkbox"/> Orchestra Pit – Removal & Reinstall	\$500.00 x _____ = _____	<input type="checkbox"/> Choral Risers	\$200.00 x _____ = _____
<input type="checkbox"/> Vocal/Instrumental Microphone	\$ 15.00 x _____ = _____	<input type="checkbox"/> Projection Screen	\$ 50.00 x _____ = _____
<input type="checkbox"/> Wireless Microphone	\$ 75.00 x _____ = _____	<input type="checkbox"/> Music Stands (p/stand)	\$ 5.00 x _____ = _____
<input type="checkbox"/> Grand Piano (w/standard tuning)	\$300.00 x _____ = _____	<input type="checkbox"/> Video Projector	\$200.00 x _____ = _____

- ◆ Additional Stagehand(s) may be added at a rate of \$40.00 each per ½ 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	\$ _____
- EQUIPMENT FEES	\$ _____
- THEATER FEES	\$ _____
- CUSTODIAL FEES	\$ _____
TOTAL RENTAL FEES	\$ _____
<i>A 30% non-refundable deposit is required to secure your reservation.</i>	
FULL PAYMENT IS DUE – 2 WEEKS PRIOR TO RENTAL DATE	

Completed by: _____ DATE _____
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 _____ Date _____

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: _____

For PMS Office Use Only
☐ Approved ☐ Declined:

Organization _____ Non-Profit Tax ID # _____

Contact _____ Phone _____ Cell _____

Address _____ City _____ State _____ Zip _____

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

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 type="checkbox"/> Parking Lot (4hrs)	\$150.00 x _____ = \$ _____	<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	\$ _____
- EQUIPMENT FEES	\$ _____
- THEATER FEES	\$ _____
- CUSTODIAL FEES	\$ _____

TOTAL RENTAL FEES \$ _____

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

Completed by: _____ DATE _____
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 _____

CATERING/FOOD REQUIREMENTS

- ◆ 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 PMS Cafeteria and will be added to your contract and invoice.

◆ 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: _____ 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.

Signed _____ / _____ / _____
Date

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 Parkrose Middle School by Licensee as set forth below.

9. Licensee shall maintain a policy endorsed to include the Parkrose School District, Parkrose Middle School, school board members, agents, employees and volunteers as additional insured's as respects to the Organizations 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.
10. Licensee agrees to provide all required certificates of insurance at least fifteen (15) calendar days prior to the time of occupancy.
11. The parties agree that the specified coverage of limits if insurance in no way limit the liability of the licensee.
12. 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 Parkrose Middle School, 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 PARKROSE MIDDLE SCHOOL PROPERTY.
3. All security services including peer group security desired by Licensee shall be arranged for by special agreement with the Parkrose Middle School and shall be paid for by the Licensee.
4. The Parkrose Middle 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 Parkrose Middle School.

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 _____ Position of Responsibility _____
Signature Title

Address _____ City _____ State _____ Zip _____

APPROVED FOR USE _____ TOTAL RENTAL FEES \$ _____
Building Principal

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

PARKROSE MIDDLE SCHOOL - FACILITIES USE APPLICATION

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

Today's Date: _____

For PMS Office Use Only
☐ **Approved** ☐ **Declined:**

Organization _____ Non-Profit Tax ID # _____

Contact _____ Phone _____ Cell _____

Address _____ City _____ State _____ Zip _____

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

FACILITY FEES:

<input type="checkbox"/> Classroom (4hrs)	\$ 50.00 x _____ = \$ _____	<input type="checkbox"/> Main Gym (2hrs)	\$ 50.00 x _____ = \$ _____
<input type="checkbox"/> Cafeteria (4hrs)	\$200.00 x _____ = \$ _____	<input type="checkbox"/> Small Gym (2hrs)	\$ 25.00 x _____ = \$ _____
<input type="checkbox"/> Stage (4hrs**)	\$200.00 x _____ = \$ _____	<input type="checkbox"/> Main Field (2hrs)	\$ 50.00 x _____ = \$ _____
<input type="checkbox"/> Kitchen (4hrs)*	\$200.00 x _____ = \$ _____	<input type="checkbox"/> Baseball Field (2hrs)	\$ 50.00 x _____ = \$ _____
<input type="checkbox"/> Parking Lot (4hrs)	\$300.00 x _____ = \$ _____	<input type="checkbox"/> Track (p/hr)	\$ 50.00 x _____ = \$ _____
<input type="checkbox"/> Locker Room (each/4hr)	\$ 25.00 x _____ = \$ _____	<input type="checkbox"/> Wrestling Rm (4hrs)	\$ 25.00 x _____ = \$ _____
<input type="checkbox"/> Tennis Courts (4cts/2hrs)	\$ 50.00 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	\$ 10.00 x _____ = \$ _____	<input type="checkbox"/> Lining Baseball Field	\$ 100.00 x _____ = \$ _____
<input type="checkbox"/> Microphone	\$ 10.00 x _____ = \$ _____	<input type="checkbox"/> Initial Set up & Lining Soccer Field	\$ 250.00 x _____ = \$ _____
<input type="checkbox"/> TV/VCR/DVD	\$ 20.00 x _____ = \$ _____	<input type="checkbox"/> Lining Soccer Field (maintenance)	\$ 100.00 x _____ = \$ _____
<input type="checkbox"/> Overhead Projector	\$ 10.00 x _____ = \$ _____	<input type="checkbox"/> Initial Set up & Lining Football Field	\$ 575.00 x _____ = \$ _____
<input type="checkbox"/> Sound System	\$ 50.00 x _____ = \$ _____	<input type="checkbox"/> Lining Football Field (maintenance)	\$ 100.00 x _____ = \$ _____
<input type="checkbox"/> Piano	\$ 50.00 x _____ = \$ _____		
<input type="checkbox"/> Chairs ((per chair)	\$ 2.00 x _____ = \$ _____		
<input type="checkbox"/> Tables (per table)	\$ 10.00 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	\$ _____
- EQUIPMENT FEES	\$ _____
- THEATER FEES	\$ _____
- CUSTODIAL FEES	\$ _____

TOTAL RENTAL FEES \$ _____

A 30% non-refundable deposit is required to secure your reservation.

FULL PAYMENT IS DUE – 2 WEEKS PRIOR TO RENTAL DATE

Completed by: _____ DATE _____

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 _____

CATERING/FOOD REQUIREMENTS

- ◆ 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 PMS Cafeteria and will be added to your contract and invoice.

◆ 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: _____ 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.

Signed _____ / _____ / _____
Date

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 Parkrose Middle School by Licensee as set forth below.

13. Licensee shall maintain a policy endorsed to include the Parkrose School District, Parkrose Middle School, school board members, agents, employees and volunteers as additional insured's as respects to the Organizations 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.
14. Licensee agrees to provide all required certificates of insurance at least fifteen (15) calendar days prior to the time of occupancy.
15. The parties agree that the specified coverage of limits if insurance in no way limit the liability of the licensee.
16. 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

6. 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 Parkrose Middle School, together with all rules and regulations of the Bureau of Police of the City of Portland.
7. THE USE OF ALL TOBACCO, ALCOHOLIC BEVERAGES AND CONTROLLED SUBSTANCES ARE STRICTLY PROHIBITED IN OR ON PARKROSE MIDDLE SCHOOL PROPERTY.
8. All security services including peer group security desired by Licensee shall be arranged for by special agreement with the Parkrose Middle School and shall be paid for by the Licensee.
9. The Parkrose Middle School shall have the sole right to collect and have custody of articles left in the building.
10. Any decision affecting any matter not herein expressly provided for shall rest solely within the discretion of the Parkrose Middle School.

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 _____ Position of Responsibility _____
Signature Title

Address _____ City _____ State _____ Zip _____

APPROVED FOR USE _____ TOTAL RENTAL FEES \$ _____
Building Principal

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

PARKROSE ELEMENTARY SCHOOLS - FACILITIES USE APPLICATION

"Parkrose Community Groups/Non-Profit Organizations"

Parkrose School District – 10636 NE Prescott Street – Portland, Oregon 97220 – Fax (503) 408-2140

Today's Date: _____

For Office Use Only
☐ Approved ☐ Declined:

Organization _____ Non-Profit Tax ID # _____

Contact _____ Phone _____ Cell _____

Address _____ City _____ State _____ Zip _____

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

FACILITY FEES:

☐ Gym (2hrs) \$ 12.50 x _____ = \$ _____
☐ Main Field (2hrs) \$ 12.50 x _____ = \$ _____
☐ Baseball Field (2hrs) \$ 12.50 x _____ = \$ _____
☐ Softball Field (2hrs) \$ 12.50 x _____ = \$ _____
☐ Classroom (4hrs) \$ 12.50 x _____ = \$ _____
☐ Stage (4hrs) \$ 50.00 x _____ = \$ _____
☐ Cafeteria (4hrs) \$ 50.00 x _____ = \$ _____
☐ Kitchen (4hrs) \$ 50.00 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. PSD will not invoice on the half, quarter, or partial units.*

EQUIPMENT FEES:

☐ Podium \$ 5.00 x _____ = \$ _____
☐ Microphone \$ 5.00 x _____ = \$ _____
☐ TV/VCR/DVD \$ 10.00 x _____ = \$ _____
☐ Overhead Projector \$ 5.00 x _____ = \$ _____
☐ Sound System \$ 25.00 x _____ = \$ _____
☐ Piano \$ 25.00 x _____ = \$ _____
☐ Chairs ((per chair) \$ 1.00 x _____ = \$ _____
☐ Tables (per table) \$ 5.00 x _____ = \$ _____

CUSTODIAL FEES:

◆ Monday – Friday, operating hours = \$28.00 p/hour
◆ Saturdays & Sundays – all 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 \$ _____
EQUIPMENT FEES \$ _____
CUSTODIAL FEES \$ _____

TOTAL RENTAL FEES \$ _____

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

Completed by: _____ DATE _____

Facilities Coordinator

I/we understand the above fees. If my application is accepted for the requested facility scheduled at _____, 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 _____

CATERING/FOOD REQUIREMENTS

- ◆ 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.

◆ 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: _____ 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.

Signed _____ / _____ / _____
Date

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 by Licensee as set forth below.

17. Licensee shall maintain a policy endorsed to include the Parkrose School District, Parkrose Elementary School, school board members, agents, employees and volunteers as additional insured's as respects to the Organizations 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.
18. Licensee agrees to provide all required certificates of insurance to the Parkrose School District at least fifteen (15) calendar days prior to the time of occupancy.
19. The parties agree that the specified coverage of limits if insurance in no way limit the liability of the licensee.
20. 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

13. 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 Parkrose School District, together with all rules and regulations of the Bureau of Police of the City of Portland.
14. THE USE OF ALL TOBACCO, ALCOHOLIC BEVERAGES AND CONTROLLED SUBSTANCES ARE STRICTLY PROHIBITED IN OR ON Parkrose School District PROPERTY.
15. All security services including peer group security desired by Licensee shall be arranged for by special agreement with the Parkrose School District and shall be paid for by the Licensee.
16. The Parkrose School District shall have the sole right to collect and have custody of articles left in the building.
17. Any decision affecting any matter not herein expressly provided for shall rest solely within the discretion of the Parkrose School District.

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 _____ Position of Responsibility _____
Signature Title

Address _____ City _____ State _____ Zip _____

APPROVED FOR USE _____ TOTAL RENTAL FEES \$ _____
Building Principal

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

PARKROSE ELEMENTARY SCHOOLS - FACILITIES USE APPLICATION

Parkrose School District – 10636 NE Prescott Street – Portland, Oregon 97220 – Fax (503) 408-2140

Today's Date: _____

For Office Use Only
☐ **Approved** ☐ **Declined:**

Organization _____ Non-Profit Tax ID # _____

Contact _____ Phone _____ Cell _____

Address _____ City _____ State _____ Zip _____

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

FACILITY FEES:

☐ Gym (2hrs) \$ 25.00 x _____ = \$ _____
☐ Main Field (2hrs) \$ 25.00 x _____ = \$ _____
☐ Baseball Field (2hrs) \$ 25.00 x _____ = \$ _____
☐ Softball Field (2hrs) \$ 25.00 x _____ = \$ _____
☐ Classroom (4hrs) \$ 25.00 x _____ = \$ _____
☐ Stage (4hrs) \$ 100.00 x _____ = \$ _____
☐ Cafeteria (4hrs) \$ 100.00 x _____ = \$ _____
☐ Kitchen (4hrs) \$ 100.00 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. PSD will not invoice on the half, quarter, or partial units.*

EQUIPMENT FEES:

☐ Podium \$ 10.00 x _____ = \$ _____
☐ Microphone \$ 10.00 x _____ = \$ _____
☐ TV/VCR/DVD \$ 20.00 x _____ = \$ _____
☐ Overhead Projector \$ 10.00 x _____ = \$ _____
☐ Sound System \$ 50.00 x _____ = \$ _____
☐ Piano \$ 50.00 x _____ = \$ _____
☐ Chairs ((per chair) \$ 2.00 x _____ = \$ _____
☐ Tables (per table) \$ 10.00 x _____ = \$ _____

CUSTODIAL FEES:

♦ Monday – Friday, operating hours = \$28.00 p/hour
♦ Saturdays & Sundays – all 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 \$ _____
EQUIPMENT FEES \$ _____
CUSTODIAL FEES \$ _____

TOTAL RENTAL FEES \$ _____

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

Completed by: _____ DATE _____

Facilities Coordinator

I/we understand the above fees. If my application is accepted for the requested facility scheduled at _____, 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 _____

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HOLD HARMLESS AGREEMENT

Organization Name Here: _____ 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.

Signed _____ / _____ / _____
Date

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 by Licensee as set forth below.

21. Licensee shall maintain a policy endorsed to include the Parkrose School District, Parkrose Elementary School, school board members, agents, employees and volunteers as additional insured's as respects to the Organizations 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.
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LAWS-RULES-REGULATIONS

18. 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 Parkrose School District, together with all rules and regulations of the Bureau of Police of the City of Portland.
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20. All security services including peer group security desired by Licensee shall be arranged for by special agreement with the Parkrose School District and shall be paid for by the Licensee.
21. The Parkrose School District shall have the sole right to collect and have custody of articles left in the building.
22. Any decision affecting any matter not herein expressly provided for shall rest solely within the discretion of the Parkrose School District.

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 _____ Position of Responsibility _____
Signature Title

Address _____ City _____ State _____ Zip _____

APPROVED FOR USE _____ TOTAL RENTAL FEES \$ _____
Building Principal

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