

KGAB-AR-1 Adopted: April/2003 Revised: April 2011

THIS FORM TO BE COMPLETED BY PHS FACILITY COORDINATOR ONLY

REDUCED FEES APPLICATION

FACILITY COORDINATOR ONLY

(This application is valid for one school year only. You must reapply each year.) Organization: Phone: Contact: Date(s) of event: Date of Application: Purpose of Use: The organization/event must meet the criteria for 'REDUCED' by attaching the requested supporting documentation (see criteria below). Also, A FACILITY USE APPLICATION must accompany this form. CRITERIA Attach a copy of constitution (if Group must directly serve the applicable) Parkrose community □ Attach a current list of □ No admission, entry, or other members with addresses (if fee will be charged to applicable) participants or spectators CUSTOMER PROPOSED FEES **QUOTED FEES** - FACILITY FEES - FACILITY FEES - EQUIPMENT FEES - EQUIPMENT FEES - TECH SERVICE FEES - TECH SERVICE FEES - THEATER FEES - THEATER FEES - CUSTODIAL FEES - CUSTODIAL FEES TOTAL RENTAL FEES TOTAL RENTAL FEES Additional Conditions or Terms (if applicable): History of Facility Use with Parkrose School District: the high schools water polo & Swimo

KGAB-AR-1 (Cont.)

	Renter responsible fa
This section to be completed by PSD Administration:	their own clean-up a
PSD ADMINISTRATION APPROVED FEES	student management.
- FACILITY FEES - EQUIPMENT FEES - TECH SERVICE FEES - THEATER FEES - CUSTODIAL FEES TOTAL RENTAL FEES \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Zero fees
Approved Denied : Building Principal/Designee	Date: 6/16/15
Administration Recommendation & Comments:	The state of the s
3	
Superintendent Signature	Date 6-16-15
Superintendent Recommendation & Comments:	
please approve	
΄,	
BOARD ACTION: Approved Denied Date	

PARKROSE HIGH SCHOOL FACILITIES USE APPLICATION

"Parkrose Community Groups/Non-Profit Organizations"

	(20) Out	CHOO! - 12003 NE Shove	er Street - Portland, Oregon 97220	- rax (303)	108-2739
Foday's Date:	6-11-15		For Office Use Only	Ala	A 10/15
rganization: }	w Rive (rush Agradi	Received by:	loo-Profit Ta	x IDII: 26-42245
Contact: 6	1 00	7	Phone:	G71-	175-5316
5 .	A LUO	-69	radic.	1.//	#23 3211
mail: \S(_A)		ronterm		- 5	6.7.20
Address PU	Bux 3011	64	civ Puthad	State Cit	Zip 4 12 9
Date(s)	Day of week	Facility	Access Time - Exit Ti	me Ex	pected Attendance
Plea	se Seel	Hackerl			151 - T - T - T - T - T - T - T - T - T -
FACILITY F	EES;				
Student Center	(4hrs) \$204,0	0 x= \$	[] Gym <i>(2hrs)</i>	\$ 51,00 X_	= \$
] Kitchen (4lirs)*	\$204.0	0 x = \$	[] Wrestling Rm (4hrs)	\$ 26.00 X_	= \$
] Community Ro	oms (4hrs) \$ 51.0	0 x = \$	[] Dance Room (4hrs)	\$ 26.00 x	= \$
Student Courty		0 x = \$	[] Locker Room (each/4hrs)	\$ 26,00 x	= \$
Band Room (4h	irs) \$ 51,0	0 x = \$	[] Tennis Courts (4 courts/2hrs)	\$ 51,00 x	= \$
Choir Room (4)		0 x = \$	[] Track (p/hr)	\$ 51.00 x	
Classroom (4hr	. 231		[] Football Field (2hrs)	\$ 51.00 x	= \$
Library (p/hr)	\$ 51.0		[] Basebull Field (2hrs)	\$ 51.00 X	= \$
West Parking L		0 x = S	[] Upper Soccer Field (2hrs)	\$ 51.00 X	
Pool (up to 25 p	, ,		2 [] NE Soccer Complex (2hrs)	\$ 76,00 x	(54)
Pool (swim mee	. ,	0 x = \$	[] Softball Field (2hrs)	\$ 51.00 x	
*Facilities are c	harged based on units		or all Kitchen use at \$ 26.00 p/hr, invoice on the half, quarter, or par	tial units.	
<u>EQUIPMENT F</u> [] Podium *		0 x	[] Gym Floor Cover	\$204.00 x	25
Microphone *		0 x =	[] Field Lights (per hr)	\$ 51.00 x	=
TV/VCR/DVD			[] Volleyball Net (3 nets/p use)		
Choral Risers	\$102.0	0 x = =	[] Lining Baseball Field	\$ 51.00 x	_=
Sound System	\$ 26.0		[] Initial Set up & Lining Soccer		\$255.00 x=
Chairs (p/chair)		0 x=	[] Lining Soccer Field (maintena		\$102.00 x = = = = = = = = = = = = = = = = = =
] Tables (p/table)] Bleachers (1 sia			[] Initial Set up & Lining Footba [] Lining Football Field (mainter		\$102,00 x =
Swim Scoreboa			[] Scoreboard	\$ 26.00 x	5
		harged \$31.00 p/hr for to	hose events requiring technology of	assistance.	
			AS		
	FOOD REQUIR		1 409 2 22) or one of our Bustones	d Cotorore	
			3-408-2122), or one of our Preferred choose from our list of Preferred C		th may be provided to you up
eguest (503-408-	2697). Additionally. a	Parkrose Food Service	employee will be required for all ki	tchen use at a	rate of \$26.00 p/hr.
			ter and will be added to your contra		
THEATER R	ENTALS;				
Date(s)	Day(s) of week	PACKAGE(s)	Access Time - Exit Tin	ne E	xpected Attendance
Date(3)	Dayloy or week	110111111111111111111111111111111111111	LALOUSS A HILLO ADAIT . A HE		

THEATER PACKAGES & FEES:

PACKAGE "A" This package include player(s), up to 8 stat	s: Stage to mid-stage curtain (26' of olderd lighting cues. I A/V component	depth), use of front curtain, up to 4 microphon t set-up, theater supervisor w/1 crew member.	es, 4 stage monitor speakers, hou	se CD
[] 4 Hours	\$ 765.00 x = \$ \$1122.00 x = \$	[] Additional Hour beyond 4 [] Additional Hour beyond 8	\$ 204.00 x = \$ \$ 255.00 x = \$	= 111
PACKAGE "B" This package include	s: All of Package "A", full stage to u	p-stage curtain (44' of depth), up to 4 addition essing/make-up rooms, theater supervisor w/2	crew members,	
PACKAGE "C" This package include and/or A/V cues, up [] 8 Hours	s: All of Packages "A" & "B", full ac o 10 rigging moves, theater superviso \$1377.00 x = S	ccess to lighting and sound system inventories or w/3 crew. [] Additional Hour beyond 8		
Load-In / Load Out p	ID-OUT PACKAGES ackages include: The load-in or load PHSCC equipment operation or cuein \$ 510.00 x = \$ \$ 765.00 x = \$		ssed on above details, theater supe	ervisor.
Il Row of Seat Remo		[] Projection Screen	\$225.00 x = \$102.00 x = \$ 26.00 x = \$ 3,00 x = \$153.00 x =	
up/re-set, bathro Monday - Friday, Suturdays - 7:30ai Sundays - all how "When renting the	om sanitizing and re-stockin, operating hours = n-3:00pm = s& after operating hours = HEATRE, Custodial Fees are include	lock of the building, alarming the b g, supplies/materials, and general m \$29.00 p/hour \$36.00 p/hour ed in the Theater package price (excluding St turned in 30 days prior to renta	naintenance. undays)	
Facilities Coordin \$29.00 x number of l \$36.00 x number of l	ator will complete '': sectloss	<u>\$_19,778</u>		
Completed by:	- FACILITY FEES - EQUIPMENT FEI - TECH SERVICE - THEATER FEES - CUSTODIAL FEE TOTAL RENTAL * A 30% non-refundable dep ** FULL PAYMENT IS DUE *** Payment methods:	S 34, 182 ES \$ FEES \$ CS \$ 19,778 OSH is required to secure your reservation. - 2 WEEKS PRIOR TO RENTAL DATE Cash, Check, Cashiers Check - We DATE	ellelis	
contractual, insurar the audience in and regards to our use a	ce, deposit and payment requirem	ecepted for the requested facility scheduled ents during the agreement period. I/we ag nages beyond ordinary wear and tear, which that District property will be used in accord	ree to be responsible for the cor ch occurs to this District proper dance with the rules and regula	iduct of ty in
Client Signatur		Date 6	-11-15	2
	2.00		*	_

♦ 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

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defend the claims and resulting employee with the i	agrees to indemnify, hold harmless and the District, its board members, agents, employees and volunteer from and against any and all liabilities, damages, actions, costs, losses, de expenses (including attorney fees), on account of personal injury, death or damage to or loss of property or profits arising out of or in whole or in part from any act, omission, negligence, fault or violation of law or ordinance by "Organization" or "Organization's" es, agents, volunteers, subcontractors, speakers, exhibitors, event participants or invitees or any other person entering upon the premises implied or express permission of "Organization". Such indemnification by "Organization" shall apply unless such damage or injury om the sole negligence or willful misconduct of the District.
/	- 1/1/1/2 (1) (1)
0	Sipled Date
	INSURANCE REQUIREMENTS
occurring \$500,000	cial General Liability insurance endorsement providing coverage against claims for bodily injury or death and property damage g in or upon or resulting from the facilities licensed hereunder, such insurance to offer immediate protection to the limit of no less than I and such insurance shall include Blanket Contractual Liability coverage which insures contractual liability under the indemnification of ose 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.
1.	LAWS-RULES-REGULATIONS 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.
WE AG	GREE AND UNDERSTAND ALL OF THE ABOVE. WE AGREE THAT SAID SCHOOL PROPERTY WILL BUSED IN ACCORDANCE WITH THE RULES AND REGULATIONS OF THE BOARD OF EDUCATION.
Organiza	ation or Individual Signatures Position of Responsibility 16a(1 (10) L)
Address	HO BUX 301169 CHYPOTTALCH SHOOT ZHO 12294
APPRO'	VED FOR USE Building Principal TOTAL RENTAL FEES \$ 54,540
+ FULL	PAYMENT MUST BE RECEIVED, PRIOR TO THE USE OF THE FACILITY

Pool use request for NW Blue Crush Aquatic Club

Dates	Days of week	Facility	Access Time – Exit Time	Expected Attendance
9/15-3/16	Tue-Thurs	pool	5pm – 7pm	30
9/15-3/16	Mon & Fri	Pool	5pm - 8:30pm	40
9/15-7/16	Saturday	Pool	7am – 9am	4-10
3/16-6/16	Tue-Thur	pool	3pm – 7pm	50
3/16-6/16	Mon & Fri	Pool	5pm - 8:30pm	50
6/16-7/16	Tue – Thur	Pool	2:30pm – 4pm	20
6/16-7/16 Tue - Thu	Tue – Thur	Pool	5pm – 7pm	30
6/16-7/16	6/16-7/16 Mon & Fri	Pool	5pm - 8:30pm	50

This accounts for both swimming and polo.