

THIS FORM TO BE COMPLETED BY PHS FACILITY COORDINATOR ONLY

REDUCED FEES	
(This application is valid for one school year Organization: Day karase I	ar only. You must reapply each year.)
Organization: Parkrose Si Contact: Kimberlie Word	Phone: 503-819-2717
Date of Application: 6/1//2 Date(s) of event: Saturdays Sept-Na
Purpose of Use:	(2012)
- Barnes for PSC -	
The organization/event must meet the criteria for supporting documentation (see criteria below). In must accompany this form.	
CRITERIA Group must directly serve the Parkrose community No admission, entry, or other fee will be charged to participants or spectators	 Attach a copy of constitution (if applicable) Attach a current list of members with addresses (if applicable)
QUOTED FEES	CUSTOMER PROPOSED FEES
- FACILITY FEES \$\(\)2 \(\)653 - EQUIPMENT FEES \$\(\) \(- FACILITY FEES \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
TOTAL RENTAL FEES \$3,783.00	TOTAL RENTAL FEES \$
Additional Conditions or Terms (if applicable):	
History of Facility Use with Parkrose School Dis	trict:
years of fistory	v/ Parkuse Soccertlul
Anot sure which PHS-	fields Get.

This section to be completed by PSD Administration;

PSD ADMINISTRATION APPROVED FEES

	- FACILITY FEES \$ - EQUIPMENT FEES \$ - TECH SERVICE FEES \$ - THEATER FEES \$ - CUSTODIAL FEES \$ TOTAL RENTAL FEES \$
* E _{E,Q}	Approved Denied
	Administration Recommendation & Comments:
	Date 629 8 Superintendent Signature
	Superintendent Recommendation & Comments:
	field yet - new vs. old soccer field. many was to find at how much the new field could be used - need that information now.
	BOARD ACTION: Approved Denied Date

PARKROSE HIGH SCHOOL FACILITIES USE APPLICATION

"Parkrose Community Groups/Non-Profit Organizations" Parkrose High School - 12003 NE Shaver Street - Portland Organization 97/30 Few (502) 408 277

	and the second s	aver Sueer - Pornand, Oregon 97220	- Fax (503) 408-2739
Today's Date: 6.11.1	ha	LONGOTIVE USE ONLY	
A L		Received by:	Date (2/11/) 1-
Organization: Partic	use Soccer Ch	L. N.	ion-Profit Tax ID#:
Contact: Himher	the Wood	Phone:	503.819.2717
Email: Kim	berlie wood @	concast not	The state of the s
girm,	525	City Rortland	a 80 97.2011
		THE TWEE WILL	State OR Zip 97294
Date(s) Day of	week Facility	Access Time - Exit Ti	me Expected Attendance
Sept 2012	- MOV 2012	Saturday 7	am-3pm Soccer/1
1		The state of the s	am-3pm Soccer /
		1/3 dates	
FACILITY FEES:	*- UPPER	. SOLLER FIE	2104
[] Student Center (4hrs)	\$204.00 x = \$	[] Gym (2hrs)	\$ 51.00 x = \$
[] Kitchen (4hrs)*	\$204.00 x = \$	and the second s	\$ 26.00 x = \$
[] Community Rooms (4hrs)	\$ 51.00 x = \$	***	\$ 26.00 x = \$
Student Courtyard (4hrs)	\$102.00 X = \$		\$ 26.00 x = \$
[] Band Room (4hrs)	\$ 51.00 x=\$	[] Tennis Courts (4 courts/2hrs)	
Choir Room (4hrs)	\$ 26.00 x = \$		\$ 51.00 x=\$
Classroom (4hrs)	\$ 26.00 x = \$		\$ 51.00 x=\$
Library (p/hr)	\$ 51.00 x = \$		\$ 51.00 x=\$
West Parking Lot (4hrs)	\$153.00 x = \$		\$ 51.00 x 52=\$ 2/052
] Pool (up to 25 people/ 2hrs)] Pool (swim meet/ 2hrs)	$$102.00 \times = $$ $$306.00 \times = $$	[] Softball Field (2hrs)	\$ 51.00 x=\$
**Pacities are charged based o	on units above. PHSCC will no	l for all Kitchen use at \$ 26.00 p/hr. at invoice on the half, quarter, or parti	al units.
EOUIPMENT FEES:	\$ 6.00 x =	El Competition of	**************************************
[] Microphone *	\$ 11.00 x =		\$204.00 x= \$ 51.00 x=
TV/VCR/DVD	\$ 11.00 x =		\$ 51.00 x=
] Choral Risers] Sound System	\$102.00 x ===	[] Lining Baseball Field	\$ 51.00 x=
Chairs (p/chair)	\$ 26.00 x = =	[] Initial Set up & Lining Soccer F [] Lining Soccer Field (maintenan	ield \$255.00 x = ce) \$102.00 x =
Tables (p/table)	\$ 6.00 x =	[] Initial Set up & Lining Football	Field \$587.00 x ==
Bleachers (1 side) Swim Scoreboard (pluse)	\$ 51.00 x = \$102.00 x =	[] Lining Football Field (maintena	· · · · · · · · · · · · · · · · · · ·
-		[] Scoreboard : those events requiring technology as:	\$ 26.00 x =
* PHS is a wireless building. P.	lease provide your own techno	chose events requiring sectiology as plogy & equipment.	SISDADEC.
CATERING/FOOD REC	DURMENTS		
All Catering must be contracted	d by Parkrose Food Service (50	03-408-2122), or one of our Preferred (Caterers.
If you are not using Parkrose Fo	ood Service, you are required t	to choose from our list of Preferred Car	terers which may be provided to you prop
cquest (303-405-2097). Addition All food must be consumed/ser	nany, a Parkrose Food Service ved in the PHSCC Student Car	employee will be required for all kitch nter and will be added to your contract	hen use at a rate of \$26.00 p/hr.
		The same of the contract	SARTW ALL THINKS
THEATER RENTALS:	_		-
Date(s) Day(s) of	week PACKAGE(s)	Access Time - Exit Time	Expected Attendance
	Processing and the second seco	The second secon	
			le de la constant de
Manual Park			

THEATER PACKAGES & FEES:

	s: Stage to mid-stage curtain (26° of depth), dard lighting cues, I A/V component set-up.		es, 4 stage monitor speakers, house CD			
[] 4 Hours			\$ 204.00 x=\$			
[] 8 Hours	\$ 765.00 x = \$ \$1122.00 x = \$	[] Additional Hour beyond 2	\$ 255.00 x =\$			
Похота	Q 2 Rada Q V D.	[] radicional right beyond o	9 225.00 A.			
	s: All of Package "A", full stage to up-stage s, up to 3 rigging moves, access to dressing/r \$1250.00 x= \$	make-up rooms, theater supervisor w/2				

and/or A/V cues, up to	s: All of Packages "A" & "B", full access to o 10 rigging moves, theater supervisor w/3 o	New.				
[] 8 Hours	\$1377.00 x=\$	[] Additional Hour beyond 8	\$ 306.00 x = \$			
Load-In / Load Out p They do not include ! [] 4 Hours	D-OUT PACKAGES ackages include: The load-in or load-out of PHSCC equipment operation or cueing. \$ 510.00 x = \$	your equipment, access to facilities bas	sed on above details, theater supervisor.			
ADDITIONAL THI [] Row of Seat Remo [] Orchestra Pit – Rei [] Vocal/Instrumenta [] Wireless Micropho [] Grand Piano (w/sta	moval & Reinstall \$357.00 x =	[] Choral Risers [] Projection Screen [] Music Stands (p/stand)	\$357.00 x = \$102.00 x = \$ 26.00 x = \$ 3.00 x = \$153.00 x =			
 Additional Stagehand(s) may be added at a rate of \$41.00 each per ½ day (max of 4 hours), and \$72.00 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 \$31.00 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). 						
up/re-set, bathro Monday - Friday, Saturdays - 7:30ar undays - all hour		plies/materials, and general mo p/hour p/hour p/hour	aintenance.			
Facilities Coordinator will complete this section: \$29.00 x number of hours needed 39 = \$ 1/31.00 } 3hn p/date \$36.00 x number of hours needed = \$						
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	- FACILITY FEES	\$ 2,652.00 \$ 6)			
	- EQUIPMENT FEES	\$ 6	3			
	- TECH SERVICE FEES		6 5			
	•		** **			
	- THEATER FEES	монитерия в воборожно в предоставления по	4 4 9			
	- CUSTODIAL FEES	\$ A Representation of the second	6 6 8			
	י י איינור איינור איינ	many A Co	***			
	TOTAL RENTAL FE		-			
	* A 30% non-refundable deposit is re		% d- 5-			
	** FULL PAYMENT IS DUE - 2 WE					
	*** Payment methods: Cash,	Check, Cashiers Check - We c	annot accept Visa			
	**************************************	स्टब्रियाच्याच्याच्याच्याच्याच्याच्याच्याच्याच्	(actaranteneenteneenteneenteneenteneente			
Completed by:			Diplin			
Compresed Dy	PHSCC Facilities Coordinator)	manuscondonomique and a supering supering the supering su	mount of the state			
	- more a mountaine anname.	·				
I/we understand the	above fees. If my application is accepted	for the requested facility scheduled	at PHSCC, we agree to meet all			
contractual, insuran	ce, deposit and payment requirements du	ring the agreement period. I/we agre	ee to be responsible for the conduct of			
the audience in and	about the building and for any damages b	eyond ordinary wear and tear, which	n occurs to this District property in			

District property will be used in accordance with the rules and regulation

Date 6, 11.12

regards to our use ann occupancy unerym. aw the Board of Educations (See Policy KGAA). Client Signature

Anna Santa Marie (Santa)

*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: Organization Name Here: On the Source Company 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.				
 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. 				
 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.				
 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. 				
 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.				
 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.				
 Any decision affecting any matter not herein expressly provided for shall rest solely within the discretion of the PHSCC Facility Coordinator. 				
 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 All Position of Responsibility Secretary				
Signature Signature City Northernol State CR Zip 97294				
APPROVED FOR USE W TOTAL RENTAL FEES \$ 3,783 - Building Principal FULL PAYMENT MUST BE RECEIVED, PRIOR TO THE USE OF THE FACILY				