

**PARKROSE HIGH SCHOOL FACILITIES USE APPLICATION
"STAFF/NON-PROFIT"**

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

Today's Date: _____

For Office Use Only	
<input type="checkbox"/> Approved	<input type="checkbox"/> Declined: _____
<input type="checkbox"/> Single Use	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly

Organization _____ Non-Profit Tax ID # _____

Contact _____ Phone _____ Cell _____

Address _____ City _____ State _____ Zip _____

DATE(S) REQUESTED:

Date	Day of week	Facility	Special Instructions	Times Access in - Exit out

ALL CATERING MUST BE DONE BY PHS FOOD SERVICE OR ONE OF OUR PREFERRED CATERERS

FACILITY COSTS:

Theatre *see package choices & labor cost breakdown on reverse side

<input type="checkbox"/> Student Center (4hr)	\$200.00 x _____ = _____	<input type="checkbox"/> Gym (per hr)	\$ 20.00 x _____ = _____
<input type="checkbox"/> Kitchen (4hr)	\$200.00 x _____ = _____	<input type="checkbox"/> Multi-Purpose (per hr)	\$ 12.50 x _____ = _____
<input type="checkbox"/> Faculty Room (4hr)	\$ 25.00 x _____ = _____	<input type="checkbox"/> Dance Room (per hr)	\$ 12.50 x _____ = _____
<input type="checkbox"/> Band Room (4hr)	\$ 50.00 x _____ = _____	<input type="checkbox"/> Fitness Room (per hr)	\$ 12.50 x _____ = _____
<input type="checkbox"/> Choir Room (4hr)	\$ 25.00 x _____ = _____	<input type="checkbox"/> Swimming Pool (swim meet 2hr)	\$200.00 x _____ = _____
<input type="checkbox"/> Conference Room (4hr)	\$ 25.00 x _____ = _____	<input type="checkbox"/> Swimming Pool (up to 25 people/ 2hr)	\$ 50.00 x _____ = _____
<input type="checkbox"/> Community Room (4hr)	\$ 25.00 x _____ = _____	<input type="checkbox"/> Football Field (per hr)	\$ 25.00 x _____ = _____
<input type="checkbox"/> Region Room (4hr)	\$ 25.00 x _____ = _____	<input type="checkbox"/> Baseball Field (per hr)	\$ 15.00 x _____ = _____
<input type="checkbox"/> Commons (4hr)	\$ 25.00 x _____ = _____	<input type="checkbox"/> Soccer Field (per hr)	\$ 10.00 x _____ = _____
<input type="checkbox"/> Computer Lab (4hr-10units)	\$ 75.00 x _____ = _____	<input type="checkbox"/> Track (per hr)	\$ 10.00 x _____ = _____
<input type="checkbox"/> Wet Lab (4hr)	\$100.00 x _____ = _____	<input type="checkbox"/> Tennis Courts (per court per hr)	\$ 5.00 x _____ = _____
<input type="checkbox"/> Locker Room (each)	\$ 25.00 x _____ = _____	<input type="checkbox"/> Outdoor Concessions (per hr)	\$ 10.00 x _____ = _____
<input type="checkbox"/> Track (per hr)	\$ 5.00 x _____ = _____	<input type="checkbox"/> Student Courtyard (4hr)	\$100.00 x _____ = _____

ADDITIONAL ITEM COSTS:

Custodial Fees *please complete additional information sheet

<input type="checkbox"/> Podium	\$ 5.00 x _____ = _____	<input type="checkbox"/> Technical Support	\$TBA x _____ = _____
<input type="checkbox"/> Microphone	\$ 5.00 x _____ = _____	<input type="checkbox"/> Gym Floor Cover	\$100.00 x _____ = _____
<input type="checkbox"/> Whiteboard	\$ 10.00 x _____ = _____	<input type="checkbox"/> Volleyball Nets	\$ 20.00 x _____ = _____
<input type="checkbox"/> TV/VCR	\$ 10.00 x _____ = _____	<input type="checkbox"/> Scoreboard	\$ 15.00 x _____ = _____
<input type="checkbox"/> Overhead Projector	\$ 5.00 x _____ = _____	<input type="checkbox"/> Bleachers (1 side)	\$ 30.00 x _____ = _____
<input type="checkbox"/> Choral Risers	\$100.00 x _____ = _____	<input type="checkbox"/> Field Lights (per hr)	\$ 50.00 x _____ = _____
<input type="checkbox"/> Platforms (per)	\$ 10.00 x _____ = _____	<input type="checkbox"/> Lining Football Field	\$105.00 x _____ = _____
<input type="checkbox"/> Grand Piano	\$ 50.00 x _____ = _____	<input type="checkbox"/> Lining Baseball Field	\$ 30.00 x _____ = _____
<input type="checkbox"/> Upright Piano	\$ 25.00 x _____ = _____	<input type="checkbox"/> Lining Soccer Field	\$ 95.00 x _____ = _____
<input type="checkbox"/> Sound System	\$ 25.00 x _____ = _____	<input type="checkbox"/> Lining Track	\$ 60.00 x _____ = _____
<input type="checkbox"/> V-Tel Equipment	\$ 50.00 x _____ = _____	<input type="checkbox"/> Multi-Media Cart	\$ 65.00 x _____ = _____
<input type="checkbox"/> Canopy Booth	\$ 50.00 x _____ = _____	<input type="checkbox"/> Tables (per table)	\$ 5.00 x _____ = _____
<input type="checkbox"/> Slide Projector	\$ 10.00 x _____ = _____	<input type="checkbox"/> Tarp cover for gym floor	\$ 50.00 x _____ = _____

Videotaping and production can be purchased (for more information, please check this box)

OPEN TO THE PUBLIC? YES NO EXPECTED ATTENDANCE _____

WILL ADMISSION BE CHARGED? YES NO

A FEE FOR PARTICIPANTS? YES NO

TOTAL RENTAL CHARGES \$ _____

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

COMPLETE THIS PAGE ONLY WHEN RENTING THE THEATRE

DATE	DAY OF WEEK	PACKAGE	SPECIAL INSTRUCTIONS	HOURS

THEATRE PACKAGE COSTS:

- | | |
|--|---|
| <input type="checkbox"/> Load-In/Out (off peak 4hr) \$350.00 x ___ = ___ | <input type="checkbox"/> Load-In/Out (off peak 8hr) \$ 600.00 x ___ = ___ |
| <input type="checkbox"/> Load-In/Out (peak 4hr) \$500.00 x ___ = ___ | <input type="checkbox"/> Load-In/Out (peak 8hr) \$ 750.00 x ___ = ___ |
| <input type="checkbox"/> Package "A" Mini Pack (off peak 4hr) \$450.00 x ___ = ___ | <input type="checkbox"/> Package "B" Full Pack (off peak 8hr) \$ 800.00 x ___ = ___ |
| <input type="checkbox"/> Package "A" Mini Pack (each addt'l hr)\$150.00 x ___ = ___ | <input type="checkbox"/> Package "B" Full Pack (each addt'l hr)\$ 225.00 x ___ = ___ |
| <input type="checkbox"/> Package "A" Mini Pack (peak 8hr) \$625.00 x ___ = ___ | <input type="checkbox"/> Package "B" Full Pack (peak 8hr) \$1100.00 x ___ = ___ |
| <input type="checkbox"/> Package "A" Mini Pack (each addt'l hr)\$175.00 x ___ = ___ | <input type="checkbox"/> Package "B" Full Pack (each addt'l hr)\$ 250.00 x ___ = ___ |
| <input type="checkbox"/> Package "B" Mini Pack (off peak 4hr) \$550.00 x ___ = ___ | <input type="checkbox"/> Package "C" Full Pack (off peak 8hr) \$ 900.00 x ___ = ___ |
| <input type="checkbox"/> Package "B" Mini Pack (each addt'l hr) \$175.00 x ___ = ___ | <input type="checkbox"/> Package "C" Full Pack (each addt'l hr)\$ 250.00 x ___ = ___ |
| <input type="checkbox"/> Package "B" Mini Pack (peak 4hr) \$750.00 x ___ = ___ | <input type="checkbox"/> Package "C" Full Pack (peak 8hr) \$1225.00 x ___ = ___ |
| <input type="checkbox"/> Package "B" Mini Pack (each addt'l hr) \$200.00 x ___ = ___ | <input type="checkbox"/> Package "C" Full Pack (each addt'l hr) \$ 275.00 x ___ = ___ |
| <input type="checkbox"/> Package "A" Full Pack (off peak 8hr) \$700.00 x ___ = ___ | <input type="checkbox"/> Package "D" Full Pack (of peak 8hr) \$1000.00 x ___ = ___ |
| <input type="checkbox"/> Package "A" Full Pack (each addt'l hr) \$200.00 x ___ = ___ | <input type="checkbox"/> Package "D" Full Pack (each addt'l hr)\$ 275.00 x ___ = ___ |
| <input type="checkbox"/> Package "A" Full Pack (peak 8hr) \$950.00 x ___ = ___ | <input type="checkbox"/> Package "D" Full Pack (peak 8hr) \$1350.00 x ___ = ___ |
| <input type="checkbox"/> Package "A" Full Pack (each addt'l hr) \$225.00 x ___ = ___ | <input type="checkbox"/> Package "D" Full Pack (each addt'l hr)\$ 300.00 x ___ = ___ |

ADDITIONAL SERVICE COSTS:

- | | |
|--|--|
| <input type="checkbox"/> Additional Supervisor (4hr minimum) \$ 100.00 x ___ = ___ | <input type="checkbox"/> Additional Crew Member (4hr min) \$ 35.00 x ___ = ___ |
|--|--|

ADDITIONAL EQUIPMENT COSTS:

- | | |
|---|--|
| <input type="checkbox"/> Podium \$ 15.00 x ___ = ___ | <input type="checkbox"/> Monitor Speakers (per speaker) \$ 25.00 x ___ = ___ |
| <input type="checkbox"/> Hanging Microphone \$ 25.00 x ___ = ___ | <input type="checkbox"/> Tables (per table) \$ 5.00 x ___ = ___ |
| <input type="checkbox"/> Vocal/Instrumental Microphone \$ 15.00 x ___ = ___ | <input type="checkbox"/> Chairs (per chair) \$ 1.00 x ___ = ___ |
| <input type="checkbox"/> Wireless Microphone \$ 25.00 x ___ = ___ | <input type="checkbox"/> Music Stands (per stand) \$ 1.00 x ___ = ___ |
| <input type="checkbox"/> A/V Equipment Set up \$ 25.00 x ___ = ___ | <input type="checkbox"/> Risers \$ 100.00 x ___ = ___ |
| <input type="checkbox"/> Projection Screen \$ 25.00 x ___ = ___ | <input type="checkbox"/> Platforms (per platform) \$ 25.00 x ___ = ___ |
| <input type="checkbox"/> Grand Piano (w/standard tuning) \$ 125.00 x ___ = ___ | <input type="checkbox"/> Follow Spot (addt'l crew required) \$ 25.00 x ___ = ___ |
| <input type="checkbox"/> Upright Piano (w/standard tuning) \$ 75.00 x ___ = ___ | <input type="checkbox"/> TV/VCR \$ 20.00 x ___ = ___ |
| <input type="checkbox"/> Sound Shells \$ 100.00 x ___ = ___ | <input type="checkbox"/> Video Projector \$ 100.00 x ___ = ___ |
| <input type="checkbox"/> Dance Floor \$ 350.00 x ___ = ___ | <input type="checkbox"/> Orchestra Pit – Rem. & Reinstall \$ 325.00 x ___ = ___ |
| <input type="checkbox"/> Row of Seat Rem. & Reinstall \$ 175.00 x ___ = ___ | |

THEATRE RENTAL CHARGES	\$ _____
PLUS + CHARGES FROM PAGE ONE	\$ _____
PLUS ADDIT'L CUSTODIAL CHARGES	\$ _____
TOTAL RENTAL CHARGES	= \$ _____

I/we understand the above charges. 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.

Client Representative _____ **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

Agrees to indemnify and hold harmless the District, its agents, employees, or any other person against loss or expense, including attorney's fees by the reason of bodily injury, property damage, or personal injury arising out of the sole negligence of myself, my employees, or my organization. This Agreement applies to my use or my organization use of District facilities or any other obligation, which I have arising out of the Districts premises or operations.

It is further understood that I shall, at the option of the District, defend with appropriate legal counsel and shall further bear all costs and expenses, including expenses of counsel in defense of any suit arising hereunder.

_____/_____/20_____
Signed *Date*

INSURANCE REQUIREMENTS

Comprehensive General Liability insurance with the Broad Form Comprehensive General Liability 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 not less than \$500.00 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 with respect to each such policy or agreement evidence of such insurance endorsements as may be required by PHSCC and shall at all times deliver and maintain with Parkrose High School a certificate with respect to such insurance in form acceptable to the PHSCC Facility Coordinator.
2. Licensee agrees to provide all required certificates of insurance to the PHSCC Facility Coordinator at least fifteen (15) 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 obtain the written agreement on the part of each insurance company to notify Parkrose High School prior to cancellation or non-renewal of any such insurance.

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. A current list of approved beverages may be obtained from the Facilities Coordinator.
7. A concession fee of .25 per expected attendee may be charged to licensee requesting the vending machines at PHSCC be turned off.

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 ED.

Organization or Individual _____ Position of Responsibility _____
Signature *Title*
Address _____ City _____ State _____ Zip _____

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

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

CUSTODIAL CHARGES/CATERING REQUIREMENTS

Today's Date _____

Organization _____

Name _____ Phone _____

DATE(S) REQUESTED:

Date	Type of Event	Facility	Hours

ALL CATERING MUST BE DONE BY PHS FOOD SERVICE OR ONE OF OUR PREFERRED CATERERS

How many people will be attending? _____

Will you need additional tables? _____ How many? _____ What type? _____

Are you bringing your own tables? _____ How many? _____ What type? _____

Will you need additional chairs? _____ How many? _____

Are you serving food? _____ If yes, circle one: breakfast – lunch – dinner - light refreshments – beverages only

Are you using Parkrose Food Service? _____

If you are not using Parkrose Food Service, you MUST choose from our list of Preferred Caterers.

- | | | | |
|--------------|-------------------------------|-----------------|----------------|
| Circle one – | Always Perfect Catering | Michele Blaine | (503) 465-0400 |
| | Delphina's Bakery | Carolyn Mistell | (503) 221-1829 |
| | Sylvias Catering | Laura Flores | (503) 288-6828 |
| | Tommy's Catering For You | Tommy Wright | (360) 256-7853 |
| | PHS Food Service | Joan Opp | (503) 408-2122 |
| | Bruchi's Cheese Steaks & Subs | Teri Ziegler | (360) 882-8823 |

CUSTODIAL CHARGES

- ◆ Custodial Charges are \$25.00 per hour Monday – Friday and 7:30am to 3:30pm on Saturdays
- ◆ Custodial Charges are \$40.00 per hour on Sundays and after 3:30pm on Saturdays
- ◆ When renting the THEATRE ONLY, custodial charges are already included in the package price (excluding Sundays)

Head Custodian will complete below:

\$25.00 x number of hours needed _____ = \$ _____

\$40.00 x number of hours needed _____ = \$ _____

APPROVED _____ **DATE** _____
Head Custodian

