

**CITY OF WOODLAND
FACILITIES RENTAL AND USE AGREEMENT**

(Usage Date)

Facility Requested (Mark the facility box desired, circle fee amounts, and write in total on line. **Rental fees are per day**).

- | | | | |
|--|-----------------|---------------------------------------|-----------------------------|
| <input type="checkbox"/> H.S. Covered Area | Resident | \$ 25 / \$ 50 deposit | |
| ◇ Inquiry | Non-Resident | \$ 75 / \$ 50 deposit | Fee Amount: _____ |
| ◇ Reservation | Non-Profit Org. | \$ 25 / \$ 50 deposit | |
| <input type="checkbox"/> Community Center | Resident | \$ 60 / \$ 150 deposit | |
| ◇ Inquiry | Non-Resident | \$ 100 / \$ 150 deposit | Fee Amount: _____ |
| ◇ Reservation | Non-Profit Org. | \$ 10 mo. or maintenance / \$ 50 dep. | |
| <input type="checkbox"/> Council Chambers | | | Fee Amount: <u>\$ 50.00</u> |
| <input type="checkbox"/> Conference Room | | | Fee Amount: <u>\$ 35.00</u> |

NOTE: Are you a recognized Non-profit Organization? Yes No

Times and Dates of Use

Usage Date (s): _____ Day (s) of Week: _____
 Arrival Time: _____ Departure Time: _____
 Type of Activity: _____ Expected Attendance: _____

Requesting Individual or Organization

Applicant Name: _____
 Applicants Representative (if different): _____
 Organization / Business: _____
 Mailing Address: _____ Phone: _____
 _____ Fax: _____

Please Read Carefully

- | | |
|--|--|
| ▪ Open and Close at stated time | ▪ No tobacco, smoking, or alcohol beverages |
| ▪ Adult supervision is required at ALL TIMES | ▪ User is responsible for damages and clean-up |
| ▪ Please give 24-hour notice of cancellation | ▪ All agreements expire at end of the semi-annual reservation period (June/December) |
| ▪ Use only facilities listed on application | |
| ▪ Any emergency situation or bad weather may cause cancellation of facilities without notification | |
| ▪ Failure to observe rules and regulations of the City may result in loss of usage privileges | |

NOTICE: Deposits will be non-refundable if key is not returned, a city employee is called out to unlock, clean up, etc.

Agreement The undersigned hereby makes application to the City of Woodland for use of city facilities described above and certifies that the information given in this application is correct. The undersigned further states that he/she has the authority to make this application for the applicant and agrees that the applicant will observe all rules and regulations of Woodland Municipal Code and policies of the city in which the facilities are requested.

Applicant agrees that City of Woodland and City of Woodland agents, employees, and directors shall not be liable for any damage to person or property by reason of the negligent acts of Applicant, its agents, employees, invitees, or subcontractors. Applicant agrees to protect indemnify for costs, legal and other expenses, and hold harmless City of Woodland and its officers, employees, directors and agents from claims, liabilities, or suits arising out of injury to person or property from negligent acts of Applicant, its agent, employees, invitees, or subcontractors.

Applicant's Signature: _____ **Date** _____

OFFICE USE ONLY:	Amount Paid	\$ _____	<input type="checkbox"/> CA	<input type="checkbox"/> CK	Date Key Returned:
Approved <input type="checkbox"/>	Denied <input type="checkbox"/>	Received by:	_____	Date:	_____
Request taken by:	_____	Key No / Color:	_____	Date:	_____
Date:	_____	Receipt No.	_____	Card No.	_____
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