



FACILITIES RENTAL APPLICATION

Key # _____

PO Box 458 * Veneta, OR 97487 * 541-935-2191 * Fax 541-935-1838 * www.venetaoregon.gov

Mark one: Private Party/Individual Non-commercial Senior citizen group Governmental agency
 Educational program

Name of Organization/Applicant: _____

Mailing Address: _____ City/Zip: _____

Phone (s): _____ Email: _____

Date (s) of Use: _____ Time : _____ to _____
 (Must include set-up & clean up time)

Estimated attendance: _____ Type of Event _____

Requested Facility:

Community Center (25192 E Broadway) Not to exceed 100 people (Includes use of full kitchen; 8-8' banquet tables; 4-4' round tables; and chairs for indoor use only.

<u>Rental Rates:</u>	<u>Number in attendance</u>	<u>Min. Charge (1st 3 hrs.)</u>	<u>Each Add. Hour</u>
	1-10 People	\$35	\$15
	11-50 People	\$45	\$20
	51-100 People	\$55	\$25

- Deposit of \$50.00 required for all rentals even if fee is waived or reduced. Deposit refundable if key is returned and the Community Center is cleaned up as instructed in the Facilities Rental Rules and Agreements.
- Events or group activities sponsored by organized senior citizen groups will receive a 50% discount on above rental fee.
- Scheduled education programs may be scheduled on a 1 hour basis at the rate of \$15.00/hour.
- Non-profit organizations may submit written requests to the City Council for fee reductions or fee waivers for consideration by City staff or City Council.
- Failure to comply with Facilities Rental Rules & Agreements may affect continued and/or future waiver requests.
- Events sponsored by the City of Veneta and/or other governmental agencies may use the Community Center at no cost.
- Fee reductions and waivers do not include the key/cleaning deposit.

I certify that I am the authorized representative of the above group(s), and that the above statements are true to the best of my knowledge, and that myself and the organization I represent, agree to be bound by the rules and agreements regarding use of the Cities facilities. I understand that violation of any of these policies may jeopardize current and future use of the facility. I have been given a copy of the rules and agreements and I and the organization I represent understand and agree to abide by them in their entirety.

Signature of Applicant

Date

FOR OFFICE USE ONLY			
Rental Fee	\$ _____	Date Paid	_____
Receipt #	_____	Initials	_____
Deposit \$50/Date paid	_____	Amount of Waiver Requested	\$ _____
		Council Waiver Approved	<input type="checkbox"/> Yes <input type="checkbox"/> No
		Date Approved/Denied	_____/_____/_____