



Rental Agreement

For the consideration of rents herein specified, the City of Winston does hereby lease unto the use of the Winston Community Center, located at 440 SE Grape (corner of SE Grape & SE Thompson):

Area	Amenities √ Indicate if Needed # Needed	Area	Amenities √ Indicate if Needed # Needed
Grand Room Occupancy: Seated/Standing: 300 Table Seating: 200 _____ (√ here)	<input type="checkbox"/> Chairs # _____ <input type="checkbox"/> Tables-Round # _____ <input type="checkbox"/> Tables-Rectangle # _____ <input type="checkbox"/> Wireless Microphone <input type="checkbox"/> AV cables <input type="checkbox"/> Limited Stage Use * <input type="checkbox"/> Powerpoint/Projector screen <input type="checkbox"/> Projector remote <input type="checkbox"/> 50" Monitors # _____ <input type="checkbox"/> Monitor remotes # _____ <input type="checkbox"/> Service Kitchen <input type="checkbox"/> Hearing Devices # _____ <input type="checkbox"/> Separate Lighting Controls <input type="checkbox"/> Credit card phone access <input type="checkbox"/> Ticket Booth access	Ford Room (A) Occupancy: Seated/Standing: 160 Table Seating: 96 _____ (√ here)	<input type="checkbox"/> Chairs # _____ <input type="checkbox"/> Tables-Round # _____ <input type="checkbox"/> Tables-Rectangle # _____ <input type="checkbox"/> Wireless Microphone <input type="checkbox"/> AV cables <input type="checkbox"/> Limited Stage Use * <input type="checkbox"/> Powerpoint/Projector screen <input type="checkbox"/> Projector remote <input type="checkbox"/> 50" Monitors # _____ <input type="checkbox"/> Monitor remotes # _____ <input type="checkbox"/> Service Kitchen <input type="checkbox"/> Hearing Devices # _____ <input type="checkbox"/> Credit card phone access

Bridal Package _____ includes: Grand Room & Performing Arts Stage (1/2 day/rehearsal 2 p.m. – midnight)
 Grand Room & Performing Arts Stage (full day/event 5 a.m. - midnight) & Room D (full day/event 5 a.m. – midnight)

Premier Room (B) Occupancy: Seated/Standing: 80 Table Seating: 40 _____ (√ here)	<input type="checkbox"/> Chairs # _____ <input type="checkbox"/> Tables-Round # _____ <input type="checkbox"/> Tables-Rectangle # _____ <input type="checkbox"/> 50" Monitor <input type="checkbox"/> Monitor remote <input type="checkbox"/> Wireless Microphone <input type="checkbox"/> Service Kitchen <input type="checkbox"/> Hearing Devices # _____ <input type="checkbox"/> Credit card phone access	Woods Room (C) Occupancy: Seated/Standing: 80 Table Seating: 40 _____ (√ here)	<input type="checkbox"/> Chairs # _____ <input type="checkbox"/> Tables-Round # _____ <input type="checkbox"/> Tables-Rectangle # _____ <input type="checkbox"/> 50" Monitor <input type="checkbox"/> Monitor remote <input type="checkbox"/> Wireless Microphone <input type="checkbox"/> Service Kitchen <input type="checkbox"/> Hearing Devices # _____ <input type="checkbox"/> Credit card phone access
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Wooley Conference Room (D) Occupancy: 8 _____ (√ here)	<input type="checkbox"/> Oval Table, Chairs, & large screen TV with computer input capability.	Commercial Kitchen _____ (√ here)	<input type="checkbox"/> Available with rental of Grand Room, Rm A,B, or C for use by an approved caterer (Refer to approved caterer list)
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Performing Arts Stage _____ (√ here)	<input type="checkbox"/> Includes access to all stage area behind the front performing curtains	Computer Lab _____ (√ here)	<input type="checkbox"/> Terminals # _____ <input type="checkbox"/> Printer <input type="checkbox"/> Large Screen Monitor
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* Limited Stage Use is defined as the area in front of the performing curtains

Will there be alcohol at this event?	_____ No	_____ Initial	_____ Yes	_____ Initial	_____ Insurance Copy
I have read, understood, & received a copy of the WCC Usage Policies _____ Yes _____ Initial Revision Date _____					

Optional Services (additional fee applies)		
_____ Spinet Piano	_____ Dance Floor (up to 24'x24')	_____ Place Settings

for the _____ day(s) of _____, 20____, commencing at _____ AM/PM and ending at _____ AM/PM. The undersigned shall not use or permit the same to be used for any other purpose than the following activities:

_____. The undersigned shall pay as rent for said premises the sum of \$_____, payable at the time of

booking, along with delivery of the signed rental agreement. The undersigned shall pay as security deposit the sum of \$ _____, payable upon facility key assignment.

CANCELLATION POLICY: Notification of cancellation prior to 60 days of event will entitle the undersigned to a 100% refund of rental fee; 30 days prior – 75%; 7 days prior – 25%; less than 7 days – 0%.

The City of Winston, at the commencement of the terms herein provided, shall deliver the premises herein leased in a neat and clean condition; and the undersigned shall not permit any alteration or undue wear or deterioration upon the same. At the conclusion of the term provided in the lease, the undersigned shall return said premises to the City of Winston in a neat and clean condition, reasonable wear thereof excepted. Failure to do so will result in cleaning by the City of Winston at the rate of \$30 per staff hour for which tenant shall be liable. The costs will first be taken from the deposit and if that is not sufficient, necessary action will be taken against the user to recover the additional costs. Damages will be handled in the same manner. The security deposit will be returned to the user if there are no violations of the WCC Usage Policies.

The City of Winston shall not be responsible for any loss or damage whatsoever of any kind to the undersigned, or its invitees, upon the premises herein leased, and the undersigned shall save and hold harmless the City of Winston from any loss or liability whatsoever arising out of the use of such premises. Should suit, action or other proceedings be brought to enforce any of the terms and provisions hereof, the City of Winston may recover, in addition to costs and disbursements provided by statute, such additional sum as the Court shall deem as a reasonable attorney's fee.

The undersigned hereby agrees that in consideration of the City of Winston allowing use of its facilities, he/she, or the designated responsible party, will be physically present within the facilities during all use by this group and that he/she will reimburse and indemnify the City of Winston for any costs incurred in the repair or cleaning of the facilities necessitated by this group's use of the facilities and failure to clean same. In the event it is determined that the facilities are in use during the absence of the undersigned, permission to use same can be immediately revoked and all occupants will be required to leave.

Should the undersigned be in default of any of the terms and conditions herein contained, the City of Winston may, at its option, elect to terminate this agreement without notice.

The following person(s) is (are) to be the responsible point of contact for the above-mentioned event.

Name: _____

Mailing Address: _____

Phone Number: _____

I, the undersigned, have read the above conditions concerning the use of the Community Center and by signing below I agree to abide by the conditions set forth herein.

Lessee: _____

Signed this _____ day of _____, 20_____.

Security Deposit REFUND ____ YES ____ NO

Comments:

City of Winston - 201 NW Douglas Blvd. Winston, OR 97496-9594 (541) 679-6739

Office Use Only	
Fax: 679-0496	_____
WCC Director	_____
Rent	_____ Ck # _____
Options	_____ Ck # _____
Deposit	_____ Ck # _____
Sub-total	_____
Other	_____ Ck # _____
Due	_____
By:	_____
Deposit Return Date:	

