St. Francis de Sales Cathedral Gym Rental Request Form

Thank you for inquiring about the use of the St. Francis de Sales Gym.

Date of Request: _____

The Gym is available for use with the following conditions:

- Gym is available on a first-come-first-serve basis. Once requests are processed/approved, they will be scheduled and placed on the calendar.
- **Cost:** $25.00 per hour, with a 3-hour minimum. Available for 3hr = $75, 6hr = $150, or Full Day = $300.
  - Accommodations can be made for multiple dates.
- **Insurance:** Renters will provide proof of insurance naming St. Francis de Sales Cathedral as an additional insured.
- **Renters will agree to:**
  - **Clean-up**
    - Pick up your trash. Food items will be taken to the dumpster.
    - Dry mop the floor after every use
    - Check both restrooms and turn off the lights before leaving
  - **The following are not permitted on the main floor:**
    - Food - Food will be limited to the designated areas where tables are set up. No food on the bleachers please.
    - Cleats
    - Hard sole shoes
    - Roller-skates
    - Skateboards
  - No alcohol is allowed on the premises, unless prior approval is obtained.
  - The stage and upstairs rooms are not included in the standard gym rental unless prior arrangements have been made.
- **What we provide or have available:**
  - The equipment available and provided by St. Francis are fixed Basketball hoops & mobile Volleyball Nets.
    - *If you use the volleyball equipment, please put them up and take them down.*
  - Heat is preset to 62 degrees in the winter. (Can be adjusted, if requested in advance)
  - The building is not air conditioned; however, it generally remains relatively cool during the summer.
  - There are two restrooms, but no shower facilities.
  - Trash and Recycle bins are provided.
  - Water coolers are provided by Blue Mountain Bottled Water.

REQUESTED DATE & TIME ----------

Event Date: _____ **Start Time:** _____ **End Time:** _____ **Total Hours Requested:** _____
(Three-hour minimum rental required.)

If you are wanting more than one date, please provide information below:

_____

☐ **If you are looking at scheduling on a regular "as-needed/as-available" basis, please check here.**

CONTACT INFORMATION ----------

Name: _____ **Organization (if applicable):** _____

Address: _____ **City, State, Zip:** _____

Phone: _____ **Email:** _____

EVENT INFORMATION ----------

Date Requested: _____ **Name of Event:** _____

Purpose of Rental: _____

_____

Expected Number of Participants: _____ **Will this event be open to the public?** ☐ Yes ☐ No

EQUIPMENT REQUESTED/BEING USED ----------

☐ **Basketball Hoops** *(Fixed in place)* ☐ **Volleyball Nets** *(Renter Put up & Take Down)* ☐ **Side Tables** *(Placed by stage)* ☐ **None**

Other requests: _____

INSURANCE ----------

☐ I understand that proof of liability insurance naming **St. Francis de Sales Cathedral as an Additional Insured** is required before my reservation can be fully confirmed. A copy of insurance will be provided to the St. Francis office before reservation date.

Insurance Company: _____ **Policy Number *(if available)*:** _____

RENTAL AGREEMENT ----------

By signing this contract, I agree to:

- ☐ Pay the rental fee of **$25.00 per hour (3-hour minimum)** and/or the agreed amount given at the time of approval.
- ☐ Pick up all trash and place in the trash cans and recycle bins provided and place all food items in the dumpster.
- ☐ Dry mop the gym floor after each use.
- ☐ Check both restrooms for anyone or anything left behind.
- ☐ Turn off lights before leaving.
- ☐ Ensure all doors are securely closed upon departure.
- ☐ Return any equipment to its proper storage location. (volleyball nets, balls, etc.)
- ☐ Ensure no one wears cleats, hard-soled shoes, roller skates, roller blades, or uses skateboards on the gym floor.
- ☐ Keep all participants off the stage and out of the upstairs rooms unless prior approval has been granted.
- ☐ Accept responsibility for any damage occurring during the rental period.

SIGNATURE ----------

I certify that the information provided is accurate and that I agree to abide by all facility rules and rental policies.

Applicant Signature: _____ **Date:** _____

NOTE: Submitting this form is a request only. Reservations are not confirmed until approved by St. Francis de Sales Cathedral and all required documentation and approved payment plan has been received. We will accommodate your request to the best of our ability. Thank you for your for your cooperation and rental of this facility.

Respectfully,

T. Telagani Suresh

Reverend Suresh Telagani
Pastor - St. Francis de Sales Cathedral

ST. FRANCIS GYM OFFICE USE ONLY ----------

Date Request Rec: _____ Approved By: _____ Date Approved: _____ Gym Code: _____

Rental Fee: _____ Paid Date: _____ Deposit Received (if applicable): _____

Insurance Received: ☐ Yes ☐ No Special Conditions & Notes: _____

FACILITY USAGE/INDEMNITY AGREEMENT

PARISH: St. Francis de Sales

PARISH is understood to include the Arch/Diocese of Baker

FACILITY USER: _____

DATES OF FACILITY USAGE: _____

TYPE OF FACILITY USAGE: _____

The above named FACILITY USER agrees to defend, protect, indemnify and hold harmless the above named PARISH against and from all claims arising from the negligence or fault of the above named FACILITY USER or any of its agents, family members, officers, volunteers, helpers, partners, organizational members or associates which arise out of the above identified FACILITY USAGE at the above named PARISH.

FACILITY USER agrees to provide a certificate of insurance to the PARISH, which provides evidence of general liability coverage of not less than one million dollars ($1,000,000) per occurrence. FACILITY USER also agrees to have the PARISH named as an "Additional Insured" on its general liability policy for the DATE(S) OF FACILITY USAGE in relationship to the TYPE OF FACILITY USAGE for claims which arise out of FACILITY USER'S operations or are brought against the PARISH by FACILITY USERS' employees, agents, partners, family members, students, customers, function attendees, guests, invitees, organizational members or associates. FACILITY USER also agrees to ensure that its liability insurance policy will be primary in the event of a covered claim or cause of action against PARISH.

If FACILITY USER fails to comply with the above (second) paragraph, then the above named FACILITY USER agrees to protect, defend, hold harmless and fully indemnify the above named PARISH for any claim or cause of action whatsoever arising out of or related to the usage which takes place during the above identified DATE(S) OF FACILITY USAGE that is brought against the PARISH by the above named FACILITY USER or its employees, agents, partners, family members, students, customers, function attendees, guests, invitees, organizational members or associates, even if such claim arises from the alleged negligence of the PARISH, its employees or agents, or the negligence of any other individual or organization. This paragraph does not relieve FACILITY USER's responsibility to comply with the above (second) paragraph.

If any sentence or paragraph of this agreement is held invalid, it is agreed that the balance thereof, shall continue in full legal force and effect.

SIGNED BY: _____
(Must be an official agent of FACILITY USER)

NAME (Please print): _____

DATE: _____