



Facility Event Rental Application

Event: _____

Event Date: _____

The Stallion Springs CSD is proud of the facilities available for use by the public. Our Multi-Purpose Center and park sites provide options for your event planning. To rent any of our facilities, you must complete a Facility Rental Application, pay a monetary deposit and submit the application at least four weeks prior to the requested use date.

This application, when completed, approved, and signed by an authorized Stallion Springs CSD representative, becomes your permit to use the selected facilities on the date and during the time(s) set forth. The applicant agrees to abide by the terms, rules and regulations of the permit as provided within the Rental Package and pay all fees in full, at least seven (7) days in advance of the event.

Rental prices, for any portion of the multi-Purpose Center, includes the use of the requested room(s) and use of restrooms, kitchen, chairs, tables and portable bar without cost. For purposes of the rental facility fee, a "day" is from 8:00 AM until 11:00 PM on one (1) date for a maximum total of 15 hours. A Stallion Springs CSD employee is required to be present during all events at time of set-up, tear-down and during the actual event. Staff oversight is charged at a flat rate of \$20.00 per hour for all estimated time required (set-up, tear-down and event). There are no refunds for unused time. The facility must be vacated in the same condition as found.

Multi Purpose Center:

Resident Fee / Non Resident Fee

___ Corral Room A, B or C	\$75/\$80 per hour	\$350/\$380 per day
___ Corral Room AB or BC	\$100/\$110 per hour	\$400/\$450 per day
___ Corral Room A, B & C	\$110/\$125 per hour	\$450/\$500 per day
___ Gymnasium	\$150/\$160 per hour	\$500/\$550 per day
___ Gymnasium and Corral	\$200/\$225 per hour	\$600/\$700 per day
___ Police Presence Requested	\$60 per hour	4 hour minimum.

Type of Event: _____

Event Date: _____ Start Time: _____ End Time: _____

Staff Monitor Hrs: _____ Set-up _____ Event _____ Tear-down

Total time: _____ at \$20 per hour

Estimated Attendance: _____ Adults _____ Children _____ Total

Will a live band or DJ be performing? _____ Yes _____ No (Music must end at 10:00 PM.)

Will alcohol be served? _____ Yes _____ No Will alcohol be sold? _____ Yes _____ No

(Note: If alcohol is served or sold, alcohol must be mentioned on the Insurance Certificate. If alcohol is SOLD, an ABC license is also required.)

Customer/Applicant Information: (The CUSTOMER is the person, group or organization financially responsible for the function. The APPLICANT is the name of the individual submitting this application.)

Customer Name _____

Customer Address: _____

Applicant Name: _____

Applicant Address: _____

Applicant Telephone: () _____ Cell: () _____

Alternate Contact: _____

Alternate Telephone: () _____ Cell: () _____

Insurance Requirements: The Stallion Springs CSD requires groups with ten (10) or more people to provide a Certificate of Insurance in the amount of \$1,000,000 in liability coverage; with the Stallion Springs CSD, its officers, agents, and employees named as Additionally Insured. The CSD must receive the Certificate of Insurance at least seven (7) days prior to facility use.

Security Deposit: A security deposit will be required from each user. The fee will range from \$100.00 to \$300.00 depending on the facilities rented and will be forfeited if the facility is not returned to the previous condition or if law enforcement is called to the location for disturbances of any type.

Statement of Understanding: In order to process this application, the applicant needs to understand that they must be present at all times during the activity. Upon signing this application, the applicant understands they will be held responsible for the group's actions collectively, individually and financially. The applicant must also know that, in the unlikely event that the Stallion Springs CSD needs the use of the facility (such as a community emergency) the event may need to be moved or rescheduled at no additional cost to you. All deposits are due at the time of booking, full payment within seven (7) days of the event.

Note: 501C3 non-profit organizations receive a 25% discount on rentals. The 25% excludes facility monitor fees.

Applicant Signature: _____ **Date:** _____

Event Pricing:

Facility Cost: \$ _____ +

Facility Supervisor: _____ hours @ \$20 per hour = \$ _____ +

Cleaning Deposit: \$ 300.00 _____ +

= Rental Total: \$ _____

Event Payments:

Minimum Due to Reserve Facility: \$ 400.00 _____ (\$300 Cleaning/\$100 Facility Deposit)

Amount Received: \$ _____

Remaining due, min. of 7 days prior to the event: \$ _____ Due: _____