

FāVS Center Rental Application

Name of Organization: _____

Address _____

Phone: _____

Primary Contact: _____

Website: _____

Email _____

Purpose: _____

Setup Required: _____

Approximate Attendance _____ (maximum 263)

Date/s of Event _____

Times: setup _____ event start _____ event end _____

Cancellation Notice

FāVS Center must be notified of cancellations 72 hours in advance in order for security deposit to be refunded.

Rates/Room Usage Fees

½ day (up to 5 hours) / full day (over 5 hours)

Non-member rate:

\$300 for full day *8 hours

\$150 for half day * 4 hours

Or for events less than 4 hours:

\$40 per hour.

Member rate: *(Members are those who use the facility consistently for at least six months)*

\$240 for full day *8 hours

\$120 for half day * 4 hours

Or for events less than 4 hours:
\$30 per hour.

**Minimum 2 hour rental*

Payment

A Security Deposit of 50% is required within three days of registration. Refund will be processed the week following event if cleaning expectations are met (see below).

An invoice will be sent to you digitally. Payment can be made via cash, or check (make payable to SpokaneFāVS), or digitally.

Cleaning Expectations

Guests are expected to clean up after their event. Depending on event, cleaning includes taking out trash, sweeping, putting furniture back in place, wiping counters, etc.

Hold Harmless Clause

Each party to this Agreement shall be responsible for damage to persons or property resulting from the negligence on the part of itself, its employees, agents, or officers. Neither party will be considered the agent of the other and neither party assumes responsibility to the other party for the consequences of any act or omission of any person, firm, or corporation not a party to this Agreement.

Initial _____ Renter

Initial _____ FāVS Center

Insurance and Indemnity

Renter acknowledges and agrees that the risk of loss for all contents and property belonging to FāVS Center as outlined in this agreement shall be on the renter.

The renter shall carry a policy of general liability insurance and shall provide FāVS Center with a certificate of insurance naming FāVS Center as an additional insured. The coverage available to FāVS Center as an additional insured shall not be less than \$1,000,000 combined single limit per occurrence and \$1,000,000 general aggregate.

The renter hereby agrees to indemnify, compensate and forever hold harmless, the FāVS Center, its successors and assigns, any parent affiliate and subsidiary entities, their insurers, their assigns, their successors, their legal representatives, officers, directors, employees, agents, or any others who may be acting on behalf of them from any and all claims, damages, actions, causes of action or liability whatsoever, resulting from or arising out of injury to or death of any guest, agent, employee, licensee or invitee of the Tenant in or about the Premises,

or damage or destruction of any property owned by the Tenant or any guest, agent, employee, licensee or invitee of the Tenant, unless such injury, death or damage solely and directly results from the intentional or grossly negligent acts of the FāVS Center.

By signing this document I agree to the terms listed above.

Renter signature: _____

Date _____

For Office Use: Certificate of Liability or Proof of Insurance received (date): _____