



Fitness Center Facility Rental Contract

Name of Person or Organization _____

Contact Name: _____

Address: _____

City/State/Zip: _____

Telephone (Wk): _____ (Home): _____

Please Check the following: Member Non-Member

If Organization, please check: Profit Non-Profit

Rental Date: _____

Times: _____ am/pm - _____ am/pm = _____ **Total Hours**
(Include set-up & clean up time needed for access of the facility)

IF DURING CLOSED HOURS, APPLICANT MUST VERIFY THAT THE FITNESS CENTER WILL HAVE STAFF AVAILABLE PRIOR TO SUBMITTING AGREEMENT. PLEASE ASK ABOUT YOUR DATE & TIME AS SOON AS POSSIBLE.

Please check the area for which you are applying:

Multi-purpose Room (Open hours only or an additional fee included for staffing)

<u>Non-members using facility must pay daily rate</u>	<u>Member</u>	<u>Non-Member</u>
0 – 5 hours	\$150.00	\$225.00
5 + hours	\$225.00	\$300.00

Gym/Racquetball Courts/Multi-purpose Room (Only during closed Hours)

\$100.00 per hour + Staffing (\$20 per/hr)

Pool (Only during closed Hours)

\$100.00 per hour + Lifeguard Fees & Staff Fees (\$40 per/hr)

Deposits:

A non-refundable deposit of \$10.00 is required with every application for use of specific Fitness Center Facilities or \$60.00 for use of Fitness Center Facilities during after hours at time of application. In case of cancellation caused by an act of God, such as a storm, flood, etc. all fees shall be refunded except for any actual expenses incurred by the Fitness Center. The deposit will be put towards the total fee.

Total Amount: _____

Remainder Owed: _____

Date Paid: _____ Staff Initials: _____

The applicant has received a copy of the Facility Rental Agreement and agrees upon the policies and assumes the responsibility for his/her group's compliance with them.

Signature of Applicant

Date

One signed copy of this agreement must be returned with the deposit. Remainder of Payment must be made prior to rental of the facilities.