FALLEN LEAF LAKE COMMUNITY CENTER
Rental Agreement

Activities at the Fallen Leaf Community Center (FLCC) shall be conducted with appropriate respect for the interest of the Center's immediate neighbors. The FLCC is not available for commercial use. Based on the type of event, rental fees may be charged. Use of FLCC is subject to the following guidelines:

1. Rental applications are accepted on a space available, first-come, first-served basis with the designated representative of the CSD (usually the General Manager).

2. Event information must at minimum include:
    a. Date of Event
    b. Name of applicant responsible
    c. Fallen Leaf Residence
    d. Phone and email
    e. Description of Event
    f. Hours of Use
    g. Number of guests
    h. Vendors
    i. Description of entertainment
    j. Notes

3. Hours of operation are 8 am to dusk unless special arrangements are approved in advance.

4. Facility must be cleaned (a cleaning deposit may be required.) The deposit will be returned, as long as the FLLCC is returned to pre-event condition: (i.e. broom clean, bathrooms cleaned and stocked, all debris in trash containers removed). Additional charges may be incurred if the renter or vendors fail to remove equipment, decorations or supplies in a timely manner. A designated representative of the CSD will inspect the building pre and post event.

5. There are no facilities for cooking or sink cleanup in the building. No open flames are allowed inside or on the deck of the building, without special permission from the Fire Chief. A fire watch may be required by the Fire Chief. If a fire watched is required the renter will be responsible for the hourly cost of the fire watch. This cost will be determined prior to approval of the rental applications. Trash and trash bags must be taken to one of the adjacent dumpsters.

6. Renters desiring to contract with vendors expressly agree that the relationship with such vendors, is the direct responsibility of the renter. Any and all damages caused by any vendor and/or the renter are the direct responsibility of the renter.

7. Renter and vendors shall provide a certificate of insurance for General Liability, naming the FLLCSD as additionally insured in the minimum amount of $1 million for the event and shall provide the certificate with the rental application. It shall be the sole and absolute responsibility of the renter to require vendors to provide adequate and appropriate General Liability of $1 million and worker's compensation insurance. If alcohol is served at the event, liquor liability shall be included on the certificate of insurance, whether it is renter or vendor providing the liquor.

8. Renters must walk, carpool or otherwise minimize the impact of their use on the area's limited parking facilities. Permission to use the facility in no way guarantees or allocates any parking spaces at any time.

9. Vendors may drop off personnel, supplies and equipment at the facility, however all vendor vehicles must be parked in the upper lot. If no space is available, vendor vehicles must find alternate parking.

10. The CSD is not responsible for any lost, damaged or stolen items. The renter and all vendors shall defend, indemnify, and hold harmless the CSD, its officers, members and employees against any and all liabilities arising out of injuries and damages in connection with the rental of the facility.

I have read and agree to comply with the terms of Use for the Fallen Leaf Lake Community Center.

Signed_____

Print Name _____

Date_____

FALLEN LEAF LAKE COMMUNITY CENTER

Rental Agreement

Date of Application_____

Name of Responsible Person: _____

Fallen Leaf Address: _____

Other Address: Street: _____

City: _____

State & Zip: _____

Other Phone Number: _____

Email Address: _____

Date of Event: _____

Hours of Use: _____

Description of Event: _____

Number of Guests: _____

Description of Entertainment: _____

Vendors

1. Name: _____
   Address: _____
   Phone: _____
   Specialty: _____
   Proof of Insurance Attached: Yes_____ N/A_____
2. Name: _____
   Address: _____
   Phone: _____
   Specialty: _____
   Proof of Insurance Attached: Yes_____ N/A_____
3. Name: _____
   Address: _____
   Phone: _____
   Specialty: _____
   Proof of Insurance Attached: Yes_____ N/A_____

Rental Fees: _____ Initial _____

Cleaning Deposit: _____ Initial _____

Fire Watch Fees: _____ Initial _____

Please read and initial Fees required prior to signing this form.

Other Notes:

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I have read and agree to abide by the Fallen Leaf Lake Community Center Use Guidelines. I agree by signing this form to the rental rate, cleaning deposit, Fire Watch Fee (if any) and providing General Liability Insurance as requested previously and any other special instructions.

Responsible Person Signature_____ Date_____

Approved by: _____ Date_____
General Manager FLLCSD