



RENTAL CONTRACT

Organization / Client (Lessee): _____

Address: _____

Contact Person: _____ Anticipated Attendance: _____ (not to exceed 750)

Phone: _____ Fax: _____

Type of Event: _____

FEE SCALES:

	District Related	District / Non-Profit		District / Profit		Non-District / Non-Profit		Non-District / Profit		
	Weekday/Weekend	Weekday	Saturday/Sunday	Weekday	Saturday/Sunday	Weekday	Saturday/Sunday	Weekday	Saturday/Sunday	
C	\$15.00/hr	\$15.00	\$20.00/hr	\$20.00/hr	\$25.00/hr	\$20.00/hr	\$25.00/hr	\$30.00/hr	\$35.00/hr	C
B	\$20.00/hr	\$20.00	\$25.00/hr	\$25.00/hr	\$30.00/hr	\$25.00/hr	\$30.00/hr	\$35.00/hr	\$40.00/hr	B
S	\$30.00/hr	\$50.00/hr	\$55.00/hr	\$55.00/hr	\$60.00/hr	\$55.00/hr	\$60.00/hr	\$60.00/hr	\$70.00/hr	S
R	\$40.00/hr	\$70.00/hr	\$75.00/hr	\$75.00/hr	\$80.00/hr	\$75.00/hr	\$80.00/hr	\$90.00/hr	\$100.00/hr	R
F	\$65.00/hr	\$100.00/hr	\$110.00/hr	\$110.00/hr	\$120.00/hr	\$110.00/hr	\$120.00/hr	\$130.00/hr	\$140.00/hr	F
G	\$70.00/hr	\$110.00/hr	\$120.00/hr	\$120.00/hr	\$130.00/hr	\$120.00/hr	\$130.00/hr	\$150.00/hr	\$160.00/hr	G
P	\$85.00/hr	\$140.00/hr	\$160.00/hr	\$160.00/hr	\$180.00/hr	\$160.00/hr	\$180.00/hr	\$190.00/hr	\$200.00/hr	P

- C** = Choir Room: Choir Room and up to 25 chairs (use of additional equipment may be an extra fee)
- B** = Band Room: Band Room and up to 50 chairs (use of additional equipment may be an extra fee)
- S** = Setup: Loading areas and stage area with work lights
- R** = Rehearsal: Stage area with work lights and house lights
- F** = Full Rehearsal: Stage area, dressing rooms, stage lighting (up to 6 specials), sound, and technical support
- G** = Group Presentation: Stage, house lights, general stage lights (no dimming) and sound (2 microphones and house speakers only)
- P** = Performance: Stage, dressing rooms, stage lighting (up to 6 specials), sound, technical support, and audience areas

All hourly rates have a 3 hour minimum except Setup.
Custodial Supervision (required for Non-School Days): \$35.00 per hour
Deposit (10% of estimated total) is due 2 weeks prior to use.

Fee Scale (S, R, G, F, or P)	DATE	Time of Arrival* <small>*Time doors will be unlocked</small>	Time of Performance	Time of Departure	Total Time in PAC

Please Note: You may be charged an additional fee if your group spends more time in the PAC than stated on this contract.

Lessee agrees to abide by and enforce all regulations governing the facility, both written and implied, including, but not limited to, regulations and policies listed in the PAC Use Policy and the PAC Rules and Regulations.
 Lessee agrees that the contract between the District and the Lessee terminates at the Time of Departure on the last date listed above.
 Lessee agrees to all liability to cover any damage to facility and/or equipment.
 Lessee agrees to pay additional charges for cleaning if the facility is not left in a clean and orderly condition, determined by the PACC.
 Lessee agrees to pay additional charges to cover all time spent in the PAC and all equipment used.
 Lessee agrees to pay 10% of Estimated Total if event is cancelled with less than 14 days but more than 7 days remaining until scheduled event.
 Lessee agrees to pay the Estimated Basic Rental Fee if event is cancelled with less than 7 days remaining until scheduled event.
 Lessee agrees to pay for all services rendered within 30 days of the end of the contract.

Signature of Representative: _____ **Date:** _____