



CCAC Multi-Sport Building Rental Agreement
(Revised 12/16/2016)

Group Name: _____

Date: _____

Contact Person: _____

Phone: _____

Address:

Street Address

City

State

Zip

Dates Requested:

Amenities Needed:

Terms of Agreement

- All terms within this agreement **MUST** be followed accordingly, or the agreement may be terminated and a forfeiture of fees.
- The renter must provide the CCAC with a hold harmless policy, and name the CCAC as additionally insured, up to \$1,000,000
- By signing this agreement, the party/group accepts and waives all liabilities against the CCAC, Staff and Board, for any injury that may occur as a result of this event, with the exception of facility negligence
- **At no time will gum, alcohol, tobacco or sunflower seeds be allowed in the facility**
- Renter is required to return all items back to their origin, and ensure the facility is clean of trash
- Renter is responsible for supplying their own equipment, including balls and other items
- Renter is required to report all injuries, incidents and damage to the facility, immediately
- All fees must be paid in full prior to the rental
- A security deposit of \$50 must be paid at time of reservation. The security deposit will be returned upon inspection of the facility. Security deposits will be available on Tuesday, after the event
- No refunds will be issued if cancelled within a 2-week period, prior to the rental date
- Onsite supervision must be present during the duration of the rental
- Any damages will be the responsibility of the renter, and additional fees may be applied

- All other CCAC rules will be enforced

Rental Fees

<u>Type of Rental</u>	<u>Hourly Rate</u>	
Tunnel Rental	\$25 ½ hour	_____ x \$25= _____
Tunnel Rental	\$40 per hour	_____ x \$40= _____
Full Building	\$125 per hour	_____ x \$125= _____
Special Set Up Fee	\$20 per hour	_____ x \$20= _____
	Deposit Fee	_____ \$50 _____
Discount of 10% after 5th rental (if paid at once)	10% Discount	_____
	Total Due	_____

By signing this agreement, the renter acknowledges they have read and agreed to the listed rules and responsibilities contained above.

Renter Signature	CCAC Representative Signature
Print	Print
Date	Date
OFFICE USE ONLY	
Inspection	
Refund Approval: _____	Date Check Issued: _____
	Amount : _____