



# GITANYOW INDEPENDENT SCHOOL

PO Box 369, Kitwanga BC V0J 2A0 Ph #250-849-5384 Fax #250-849-5870

## GIS RENTAL AGREEMENT

### RENTER INFORMATION:

NAME OR GROUP: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ Postal Code: \_\_\_\_\_

PHONE/CELL #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

### RENTAL INFORMATION:

EVENT TYPE: \_\_\_\_\_ Start Time: \_\_\_\_\_

RENTAL DATES: \_\_\_\_\_ End Time: \_\_\_\_\_

*(include set-up and clean-up for Weddings and dinner/dance)*

EVENT SPACE: <i>(Check one)</i>	GYM <input type="checkbox"/>	FOYER <input type="checkbox"/>	SPARE ROOM <input type="checkbox"/>
# of people expected:	_____ (max. 400)	_____ (max. 100)	_____ (max. 30)

Renter to confirm: Will the kitchen be used? YES  NO  Will there be alcohol at this event? YES  NO  Initial: \_\_\_\_\_

<b>COST TO RENT</b>	A. RENTAL FEE:	\$ _____	<b>TOTAL DUE</b> (A+B+C)
	B. DAMAGE DEPOSIT:	\$ _____	
	C. EQUIPMENT DEPOSIT: <i>(Gym Use Only)</i>	Projector/Screen \$ _____	
		Cordless Microphone \$ _____	
		\$ _____	

**WAIVER:** I/We have read, understand and agree to abide by the GIS Rental Policy and the Clean-Up Checklist pertaining to the GIS rental space (indicated above). I/We further agree to exercise the utmost care in the use of the facilities and to reimburse the cost of repairing any damage arising from our occupancy (by using damage deposit or invoiced costs). Any violation of the rental terms may lead to denial of future rental privileges.

_____	_____	_____
<i>Renter - Print Name</i>	<i>Renter - Signature</i>	<i>Date Signed</i>
_____	_____	_____
<i>GIS - Print Name</i>	<i>GIS - Signature</i>	<i>Date Signed</i>

<b>Office Use Only</b>	Rental Fee Paid: Amount: \$ _____ Receipt #: _____ Received by: _____
	Damage Deposit Paid: Amount: \$ _____ Receipt #: _____ Received by: _____
	Deposit Returned: Amount: \$ _____ Renter Signature: _____
	Equip. Deposit Returned: Amount: \$ _____ Renter Signature: _____