

SAMISH ISLAND COMMUNITY CENTER, INC.

Form # 302f1

ADMINISTRATIVE FORM

COMMUNITY CENTER EQUIPMENT RENTAL AGREEMENT FORM

Request Made: _____

Date(s) of Reservation: _____

SAMISH ISLAND COMMUNITY CENTER, Inc.

Equipment Rental Agreement

Mailing address: P.O. Box 268, Bow, WA 98232

Location address: 11292 Blue Heron Rd.

1. Samish Island Community Center equipment may be reserved for periodic and temporary **use of Samish Island residents only** for events to be held on the island.
2. Equipment must be **scheduled in advance** and is only available when the Samish Island Community Center is not rented or in use by another group for that day.
3. If the total fee for equipment is more than the rental of the community center, consider renting the community center for the day instead (this would require a certificate of insurance from your homeowner insurance, a refundable damage deposit and filling out the hall rental form instead).
4. **Rental fees** are as follows, payable in one check to the Samish Island Community Center.

Tables	\$10 per day each
Chairs	\$2 per day each
Tablecloths	\$3 per day each, plus laundering and pressing, returned to rental agent within 7 days.

5. **The Renter will save and hold harmless the Samish Island Community Center, Inc.** from any injury to any person or any loss or damage to any property caused by, or resulting from any act or omission of the user, or any officer, agent, employee, guest or visitor in the use of SICC equipment.
6. **Agreement of Terms of Rental:** By signing this Center Equipment Rental Agreement below, the Renter agrees to these terms of rental, and acknowledges the receipt of a copy of these regulations. The individual signing the rental agreement will be directly responsible for the adherence to these rules. If items are returned damaged, the renter will be charged the replacement value of the item(s).
7. Send this completed form with your check to the P.O. Box listed above.

Date(s) of use: _____ Time of use: _____ SICC Member? ___YES

Requested # of items _____ Tables@\$10ea _____ Chairs@\$2ea _____ Tablecloths@\$3ea

Total Fee paid for items requested: _____ Place where items will be used: _____

Renter Address: _____ Phone: _____

Renter Signature: _____

Revised 1/17/2012

Effective: 01-17-2012

Return to [SICC Policies Page](#)