



FACILITY RENTAL APPLICATION

1195 SE Kemper Way - Madras, OR 97741 | ph: 541-475-4253 | macrecdistrict.com

Requested facility/room:

Madras Aquatics Center

Lap lane

Lap pool

Leisure pool

MAC facility

Meeting room

Outdoor deck

Primary contact and/or organization: (Name of person with primary responsibility)

Name: _____

Cell phone: _____ Alternate phone: _____

Company/organization: _____

Mailing address: _____

Email: _____

Day of event contact person (Only if different than above)

Name: _____

Cell phone: _____ Alternate phone: _____

Mailing address: _____

Email: _____

Event information

Event type:

Family/social gathering

Classes/seminar/workshop

Business meeting

Event/tournament

Other: _____

Event name: _____

Requested date(s): _____

Set-up start time: _____ Event start time: _____ Clean-up time: _____

Expected attendance: _____

For multiple dates (on-going rentals) please attach a sheet with all dates and times listed.



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Event details

	Yes	No
Is your event open to the public?	_____	_____
Are you advertising to the public?	_____	_____
Are you charging admission?	_____	_____
Will you serve food or beverages?	_____	_____
Are you hiring a third-party vendor? (Caterer, entertainer, etc)	_____	_____
Will you be decorating the facility?	_____	_____
Are you renting equipment from other facility?	_____	_____

Other equipment requested: _____

Event description: _____

Please initial the following items to acknowledge you have read and understand the following information:

___ I am aware I am responsible for my own set-up and clean up. My reserved time includes enough time for these activities.

___ I am aware I must not arrive earlier than my rental time noted on my rental contract.

___ I am aware that all persons, including third-party vendors, must comply with all MACRD policies and procedures, including state and local law.

___ I am aware that MACRD is unable to provide storage or accept deliveries for my event.

___ I am aware I am responsible for my group, and that all guests, including children, must follow all posted rules and regulations. Failure to follow all rules and regulations of the MACRD may result in forfeiting my refundable deposit.

___ I understand all requests are on a first come, first serve basis and no date will held until a Facility Agreement has been signed and all fees have been collected.

___ I am aware that alcoholic beverages are not allowed at the MAC facility. Failure to comply with this expectation can lead to an immediate shutdown of rental.

___ (*Organization rentals only*) I understand that I must provide a certificate of insurance covering the event in the amount of \$2 million dollar per occurrence, \$5 million aggregate, naming the Madras Aquatic Center Recreation District as additionally insured no later than 30 days prior to rental date.

Applicant signature: _____ Date: _____

Printed name: _____

For Office Use: ___ Application has been approved
___ Fee received

___ Certificate of Insurance received
___ Facility has been scheduled