## PLEASE PRINT AND PRESS HARD





SPECIAL INSTRUCTIONS: Room Fees waved for Wednesday PM After School Programs

## BUILDING USE APPLICATION Bellevue School District 12037 NE 5<sup>th</sup> Street, Bellevue, WA 98005: 425-456-4500

APPLICATION NO. 72415

INSTRUCTIONS: PLEASE PRINT. The applicant is to complete PART LONLY. The facility scheduler will insert all estimated costs based on the applicant's classification and information provided. For further information, refer to Policy 9500 and Procedures 9500.1, 9500.3 and/or 9500.4. PART I - APPLICANT INFORMATION Interlake School/Location Requested: Name or Organization to be Invoiced Responsible Person/Department: Rooms Needed: (attach list if needed) Billing Address: Dates: (attach list w/times if more than 10 days) E-mail Address: Phone(Dav) Day(s) of the Week: (circle all that apply) M SU Non-Profit? YES/NO; Please provide Non-Profit # Am Time Leaving Building: Time Entering Building: pin Primary Use: ADULT/YOUTH Food Being Served? YES/NO Anticipated Attendance: Event Start Time: / につつ pan Event End Time: Description of Event: Parent Registration Information Night FEES: A \$20.00 non-refundable processing fee must accompany this application. Facility Scheduler has copies of the current fee schedule, or one may be obtained on-line. Information may also be obtained from the Facilities Office. Checks shall be made payable to Bellevue School District NO. 405. Please indicate the name of the location requested and application number on your check. School activities have preference over community use. INSURANCE: Applicants agree by their signature below to hold the Bellevue School District harmless as a result of their use. Prior to application approval, users may also be required to supply a certificate of insurance with a reputable insurance firm, indicating full liability coverage of at least \$1 million combined single limit bodily injury and property damage (with the Bellevue School District listed as an additional insured). Insurance is required for use of all Performing Arts Centers (PAC). CANCELLATIONS: Procedure 9500.1, sections 2.10 and 2.11, outlines the cancellation procedure for the applicants. Section 7.0 outlines cancellation procedure for the District. Additional cancellation information for PACs' is located in Procedure 9500.4. Section 3.0. PAC cancellations must be made at least 30 days prior to scheduled event. If not cancelled before the 30 days, customer could be invoiced for, up to half of the original estimate. Exceptions to the District cancellation procedure include power outages or closure due to inclement weather conditions as determined by school officials. SCHOOL HOLIDAYS: School facilities are not available for community use during school hours. Facility or PAC rental on holidays is contingent upon staff availability and must be predetermined. AGREEMENT: Applicant agrees by their signature below that they have read and agree to the terms and conditions stated above and/or on the reverse side of this application (or second page of electronic application) and with the District's Procedures 9500.1, 9500.3, and/or 9500.4. Approval by the District will be indicated by the issuance of this BUILDING USE APPLICATION, which has been signed by all parties. \_\_\_\_\_TODAY'S DATE: 2 . 8-2013 Mellell ANCE OF TERMS: APPLICANT SIGNATURE Credit Card Payment Information: Name on Credit Card: Credit Card #: Verification Code: Credit Card Mailing Address: Zip: I hereby authorize Bellevue School District to charge my VISA or MasterCard \$ Signature: Date: FACILITIES USE ONLY: PART II - FEES ESTIMATE Calendared by School or District? (circle applicable option) CLASSIFICATION: (circle one) 1 2 Certificate of Insurance received YES / NO ☐ Charge staffing fees to department/club ☐ Charge staffing fees to ASB Non-refundable Processing Fee: \$20.00 Cash/Check POS Facility Fee: Room(s) X \$ # hours # rooms #days Season/Session: □Fall ☐ Winter ☐ Spring (Separate Application required for each Season/Session) rate # days Performing Arts Center (PAC) # hours # days rate Supervision: School Tech\* Supervision is required for all PAC events in their entirety # hours # days rate Technician: Type: Audio, lighting or stage hand # hours rate oer tech # days Custodial\*: ☐M-F Weekend \*For PAC Minimum 2 hrs. Minimum Entire event +3 hours # hours rate # days Other (specify): (i.e., custodial, kitchen staff, equipment, parking, other) # hours / each # days rate Other (enecify): adial, kitchen staff,, equipment, parking, other) # hours / each # days rate Other (specify): (i.e., custodial, kitchen staff,, equipment, parking, other ) # hours / each # days COMMENTS: TOTAL:

Check#:

Check Amount:

POS Receipt No.

	Inter	lake Inter	<u>se</u>						
Today's Date	$\frac{3/6/3}{\text{Arrive}}$			Date of Activity Day of Week am/pm to		3/5/13			
Time Requested			Day of Weel			iesday (am/pm)			
Time requested	Event	7,00	am/pm	to	8:30 8:00	am/pm			
Lature of Activity  Number of participants	Pa	rent Reg	istration Will there b		formation	n Night			
Activity Advisor	Maria	Frichies -C	Contact nun			7200			
<u>Interlake Rental A</u>	reas			<u>Ble</u>	achers out				
□ Library			. ` □Main G	iym					
Commons (setup map	pelow) $N$	o set-up need	e	e Gym					
\ Theater (fill out district	form)	·	□Upper	Gym					
☐ Career Center									
□Classroom(s) – please I	ist here (o	r attach map)	#	#	#	#			
Indicate setup here:	_		-						
□Tables	<u> </u>								
□ Chairs <b>*</b>	□You	agree to return	facility and equip	oment to	original order.				
_]PA_System	□Cus	todial fees will b	e paid by your clu	ub/organi	zation				
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## PAC EQUIPMENT FORM; Directions for use (please read):

Return to PAC Coordinator within 5 days of Facility App submittal – fax 425-456-4584 OR 12037 NE 5<sup>TH</sup> Street, Bellevue WA 98005 To complete this form: In the <u>COLUMN</u> of the school being used <u>CIRCLE</u> the items needed.

If the equipment is available at that school, a 'Y' will be indicated. If it is not available 'N' is indicated. Associated costs are indicated with '\$Y'. A number indicates the general amount available at that school; each theater, and the equipment within, are used daily for learning. At times the full number indicated is not available and not known until we arrive.

Add special instructions on each line or at bottom in the comments section

Name of Event: 1-1/16-12-16	e rather	Registration N.gl	†Day of Event Contact Name:	Maria	17:0	boec-	CRE	
Date of Event:	PAC or Schl:		Day of Event Contact Number:					
Description of Event:								
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House/Lecture	Audience and apron ligi	hts only			12 Y		EYE	Υ
Standard	AS IS when you enter P.	AC; no light adjustment; Can be opera	ated by User from panel or turned on at start of pr	ogram and left	iayai	Υ	÷Y.∵	Υ
Custom	Requires Technician – s	pedfic; include info on spots & genie lift; CO	LORED GELS ARE USER PROVIDED		\$Y.	\$Y	ŞY	\$Y
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<b>"我们是一个人的人,我们就是一个人的人,我们就是一个人的人,我们就是一个人的人,我们就是一个人的人,我们就是一个人的人,我们就是一个人的人,我们就是一个人的人</b>	Para Contra				<b>新</b> 拉图		130000	
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Wireless Microphones	Handheld/Lapel (or clip	on)			23152	(2)	2/3	1/0
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Vocal Instrument Microphones	Dynamic Supercardioid				24	6	7.	13
Mic Stands					::3	4	<b>27</b>	8
Monitors/Speakers	Generally used for musi	cal feedback	2. 1995年	<b>图件《沟通</b>	L 2	4	4	3
Communication Head-Sets (wired only)					共6定	Q	#16Pm	12
Projector (permanently, mounted in front of screens)	EPSON PowerLite 8300	IL; User must bring in computer to p	roject presentations		Front		Front	Front
Projection Screen	Permanently mounted I	n front of main curtain at all schools			WinY :		Y	Υ
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Coat Room	Commercial Control of the Control of		en e	京を記されているない	N	N	N	Ÿ
Lobby	No. of Land				Y		N	Ÿ
Other Rooms Needed	List other rooms being rea	quested for use in the school	With the Section of the Association of the Section			<u></u>	er it is the sectional	

(gen. used for musical feedback)\*cannot accept MP3 formatted disks

Additional Comments: (please be as specific as possible, we will be using this to support your event)