

Newport Performing Arts Center

Technical/Equipment Requirements:

Name if Group: Northwest Chinese School
 Name of Event Graduation Ceremony Event Date 06/10/2017
 Contact Dong Ma Email dong.ma@nwchinese.org Phone 206-778-0377
 Day of Event Contact Name and Number (if different from above)

Additional Rooms Used: (some rooms require approval and scheduling through the school)

Green Room Ticket Booth Commons/Lobby Cafeteria Other: _____

Expected Attendance 250 Number of Performers _____

Event Description:

| Date | Time In (set-up) | House Opens | Event Start Time | Event End Time | Breakdown time |
|---------------|------------------|-------------|------------------|----------------|----------------|
| i.e. 4/5/2016 | 4:00pm | 7:00pm | 7:30pm | 9:00pm | 10:00pm |
| 06/10/2017 | | 9:00 AM | 9:30 AM | 11:00 AM | 11:30 AM |
| | | | | | |

Stage/Scenery: Grand Drape Circle: Open or Closed Center Traveler Circle: Open or Closed Cyc

Podium/Lectern Identify which side of stage R C L Projection Screen (front projection only)

Projector: Computer or dvd Player (user must provide computer, no MAC support)

Bringing Set/Scenery Pieces: description _____

Flown Scenery*: description _____

*May require additional staff depending on use

Audio: Indicate number needed. Number provided indicates how many available.

Microphones: Wireless 3 (3) Lapel 2 (____) Wired 9 (____) Choir (____) Floor/Boundary (____)

Mic Stands (3) Boom or straight Monitors CD Player Headsets

Lighting: Lecture (apron only) Standard (stage wash, can be operated by user)

Custom — Requires additional technician or user provided designer approved by the PAC Coordinator. Colored gels must be provided by the user.

Spot light — Requires additional technician or user provided operator approved by the PAC Coordinator/site supervisor.

Additional: These are available with an additional cost to public users

Music Stands (3) Choir Risers (____) Piano upright only Clouds Orchestra Pit

Folding Chairs (____) Tables (____) Band Risers

Set-Up Diagram/Comments: (any additional needs i.e. chairs in green room, etc.)



[Empty box for Application No.]

BUILDING USE/PAC APPLICATION

12037 NE 5TH Street
Bellevue, WA 98005
425-456-4500

Applicant Information

Name or
Organization
To Be
Invoiced::

Northwest Chinese School

Today's
Date: 09/06/2016

Person Responsible:

Dong Ma

Billing
Address:

616 120th Ave NE Suite C204

Bellevue

City

WA

State

98005

ZIP Code

Phone:

206 349-6927

Email

dong.ma@nwchinese.org

Are you a Non-Profit Organization?

Yes No

Tax ID#: 911 674 030 (501 c 3)

Primary Use:

ADULT

YOUTH

Anticipated Attendance:

250

School Information

School/Location Requested: Choose an Item

Rooms Needed:

PAC

Dates:

06/10/2017

Day(s) of the Week: (check all that apply)

M

T

W

T

F

SA

SU

Time Entering Building:

Time Leaving Building:

Event Start Time:

9:30 AM

Event End Time:

11:30 AM

Description of Event:

Northwest Chinese School Graduation
Ceremony

Credit Card Payment Information

Name on Credit Card: _____ Credit Card #: _____
Credit Card Mailing Address: _____ Exp. Date: _____ Verification Code: _____
City: _____ State: _____ Zip: _____

I hereby authorize Bellevue School District to charge my VISA or MASTERCARD \$ _____

Signature: _____ Date: _____

Requirements

FEES: A \$20 non-refundable processing fee must accompany this application. For information on the Building Use Fee Schedule, please click on this link: [insert link] or the Facility Scheduler or the Facilities Department has copies of the current fee schedule. Checks shall be made payable to: Bellevue School District No. 405. Please indicate the school and application number on the check.

Insurance: A Certificate of Insurance, with Bellevue School District No. 405, its directors, officials, employees, and volunteers are to be covered and named as an additional insured, on the Commercial General Liability policy with respect to liability arising out of the operations of the insured. The General Liability coverage can be provided in the form of an endorsement to the insurance. The address to be noted on the certificate of insurance should be 12111 NE 1st St., Bellevue, WA 98005.

The Certificate of Insurance should acknowledge the hold harmless agreement stated below and the liability insurance requirement shall be provided to the District two weeks prior to the scheduled use of the facility. User(s) shall agree to defend, protect, and indemnify for costs, legal, and any and all other expenses or damages and to hold harmless the District, its officers, employees, agents, and directors, from any and all claims, liabilities, or suits arising directly or indirectly out of user's use of the facilities. User(s) shall obtain liability insurance for no less than \$1,000,000 combined single limit bodily injury and property damage. **Failure to provide this certificate shall result in cancellation of the facility use and forfeiture of any deposit.**

Cancellations: PAC cancellations must be in writing at least 30 days in advance of the scheduled use. For notice provided less than 30 days before the scheduled use, the user is subject to a charge of up to half the total original cost. If a scheduled facility use is changed and/or cancelled, the user shall notify the building principal or designee in writing seventy-two (72) hours in advance of the scheduled use. To be eligible for a refund or fee adjustment, user must comply with this 72 hour advance notice.

Agreement and Signature

Applicant agrees by their signature below that they have read and agree to the terms and conditions stated above, and the Terms and Conditions of the attached Agreement (please see Page 3), and with the District Procedures 9500.1, 9500.3, and/or 9500.4. Approval by the District will be indicated by the issuance of this Building Use Application, and a Fees Estimate sheet approved by the School and the Facilities Department.

Signature: _____ Date: 09/06/2016

Signature: _____ Date: _____
School (insures custodial staffing arrangements will be made if required)

Signature: _____ Date: _____
Facility Department Approval

[Note for school: Please tape a copy of any receipt of payment, before sending application to the Facilities Department]