



Gymnasium Event Rental Application

Contact Information

Name: _____

Address: _____

Phone: _____ Email: _____

Event Information

Type of Event: _____

Date Requested: _____ Time Requested: _____ Estimated # of Guests: _____

Basic Fees

- | | |
|---|---------|
| <input type="checkbox"/> Basic Gym Rental (2 hours) | \$300 |
| <input type="checkbox"/> _____ # of Additional Hours @\$125 | \$_____ |

Available Options

The following equipment is available upon request for all meetings and gatherings:

- | | |
|---|----------|
| <input type="checkbox"/> Mats under climbing wall | Included |
| <input type="checkbox"/> Sports balls | Included |
| <input type="checkbox"/> Indoor riding toys (bikes, scooters, etc.) | Included |
| <input type="checkbox"/> Cafeteria style tables | Included |
| <input type="checkbox"/> Additional 6' tables and chairs @ \$10 per table | \$_____ |
| Total number of tables required _____ | |
| Total number of chairs required _____ | |
| <input type="checkbox"/> Projector and screen @\$60 | \$_____ |
| <input type="checkbox"/> Sound system @\$30 | \$_____ |

Total: \$_____

(Applicant Signature)

(Date)

(Staff Signature)

(Date)