



St. Helena Carnegie Building Reservation

Please make out checks and send to: St. Helena Recreation Dept.
1480 Main St., St. Helena, Ca. 94574

Room : _____

Date Requested: _____ Hours: _____

Name: _____

Organization: _____

Address: _____

Telephone: _____ Estimated Attendance: _____

Current Email: _____

Details of Intended Activity or Use: _____

Federal Tax ID #: _____ 501(c)#: _____

Reservation Fees are based per hour:

<u>Carnegie Spaces:</u>			<u>Public:</u>	<u>Non-Profit:</u>
Great Room:	\$50.00	(Max. of 60 people)	\$50.00	\$25.00
Meeting Room:	\$40.00	(Max. of 26 people)	\$40.00	\$20.00
Upstairs Classroom:	\$50.00	(Max. of 48 people)	\$50.00	\$25.00

Use of kitchen requires a Cleaning Deposit: **\$100.00**

Payment Type:	Credit Card ()	Check ()	Cash ()
Credit Card:	VISA ()	MasterCard ()	
Card Number:	_____	Exp. Date:	_____ V Code: _____

Refund Policy: Cleaning deposits will be returned within 2 weeks of use. *Reservation fees are not refundable unless the St. Helena Recreation Department is notified of cancelation 14 days prior to the reservation date.*

Would you like your refund check mailed ____ or held at City Hall for pickup ____?

<u>Office use only</u>
Deposit Refund Date: _____ Refunded By: _____

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Building Rules and Regulations:

- 1. Business hours for the Carnegie Building are 8:00 a.m. to 5:30 p.m.**
- 2. Rooms are available for rental Monday – Wednesday and Friday 8:00a.m. – 3:00p.m. Thursday, Saturday, and Sunday 8:00a.m. – 10:00p.m. based on availability.**
- 3. Right to Reschedule: If it should be necessary to reschedule or relocate and event or meeting due to a schedule conflict, the group or individual, will be given advance notice by the City of St Helena, Recreation Department.**
- 4. Instructor agrees to provide insurance, as required by the City of St. Helena. The insurance certificates shall be submitted to the City of St. Helena for approval with the reservation request prior to start of work on the class and shall include an additional endorsement naming the City of St. Helena, its agents, officials, employees, officers and volunteers as additional insured on the liability insurance policy.**
- 5. Instructor shall pay to the City monthly on the last day of each month.**

I, the undersigned, as applicant or on behalf of the applicant, signify that the information provided on this application is true and correct and hereby accept full responsibility for any breakage or damage to property or facility, and for department and conduct of those attending the function for which the facility is requested. I agree to indemnify and hold harmless the City of St. Helena and its agents, officers, officials, employees and volunteers from and against all claims, damages, losses and expenses including attorney fees arising out of the negligent act or omission of myself, any agent, anyone directly or indirectly by them or anyone for whose acts by them may be liable, except where caused by the active negligence, sole negligence or willful misconduct of the City. If permission is granted, I, or my representative agrees to be present during the entire use of the facility. My signature below signifies that I agree to abide by all of the rules and conditions of this application.

Signature _____ Date: _____