

WESTERN MENNONITE SCHOOL

FACILITY RENTAL CONTRACT

Group Requesting Usage: _____
 Date Applied: _____
 In/Out Times: _____
 Dates of Usage Requested: _____

	Hourly Rate	Daily Rate	Quantity	Units	TOTAL
1. CAFETERIA / CATERING					
Cafeteria	30	100			
Catering	* see separate pricing				
2. DORMITORY (estimate to reserve)					
			guests * # of nights		
adults (13+ years)		20			
children (2-12 yrs)		10			
3. CAMPSITES					
No electrical hook-up		10		sites	
Electricitical hookup		15		sites	
4. GYMNASIUM					
	60	250			
5. Practice Gym					
	60	250			
6. CHAPEL (contingent on church usage)					
Classrooms	30	325			
Sanctuary	90	325			
Sound system and trained personnel	25			hours	
Fellowship Room / Nursery	25	100			
7. AD BUILDING Classrooms					
	30	40		rms/day	
8. MIDDLE SCHOOL Classrooms (modulars)					
	30	40		rms/day	
9. FIELDS					
Baseball Field		100			
Softball Field		100			
Soccer		100			
10. Photocopies					
Black/White		0.05		pages	
Color		0.15		pages	

Total Rental Fee	\$
Discounts	
Estimate Due Upon Arrival	\$

CONTACT PERSON: _____
SIGNATURE: _____
ADDRESS: _____

PHONE: _____
E-MAIL: _____

Please return deposit with completed contract to:

Western Mennonite School
Charlene Schultz
9045 Wallace Rd NW
Salem, OR 97304

<i>Office Use Only:</i>	
<i>Deposit (\$100/building)</i>	_____
<i>Check #</i>	_____
<i>Date Received</i>	_____
<i>Balance Paid</i>	_____
<i>Check #</i>	_____
<i>Date Received</i>	_____