



Hempstead Recreation Center

FACILITY RENTAL AGREEMENT

Renting Party/Organization _____ Application Date _____

Date of Event _____ Set up Time _____ Number in Attendance _____

Start Time _____ (am/pm) End Time _____ (am/pm) Alcohol ___ Yes ___ No (if yes must have security)

Contact Person _____ Type of Event _____ (See Rules and Regulations)

Address _____

Home Phone _____ Work Phone _____ Cell Phone _____

Gymnasium _____ \$425 _____ \$175 **Non-Refundable Deposit End time: 12a**
(Seating Capacity 250 / 600 Maximum standing)

Meeting Room A _____ \$125 _____ \$75 **Non-Refundable Deposit End time: 12a**
(Capacity 40)

Meeting Room B _____ \$125 _____ \$75 **Non-Refundable Deposit End time: 12a**
(Capacity 40)

Meeting Room C _____ \$125 _____ \$75 **Non-Refundable Deposit End time: 12a**
(Capacity 55)

Conference Room _____ \$125 _____ \$75 **Non-Refundable Deposit End time: 12a**
(Capacity 12)

Kitchen _____ \$150 Concession Stand _____ \$150 Audio/Video _____ \$150(4) (All Day) _____ \$250

Water Park _____ \$100 8:00 am to 1:00 pm 2:00 pm to 7:00 pm

Water Park Pavilion _____ \$100 8:00 am to 1:00 pm 2:00pm to 7:00 pm

New Pavilion (4hrs) _____ \$ 100 _____ \$175 All Day (8:00am – 12:00 midnight)

Old Pavilion (4hrs) _____ \$75 _____ \$100 All Day (8:00am – 12:00 midnight)

Fields (Citizens) _____ \$85 Softball – B1 B2 B3 B4 Soccer Field –B5

Fields (Outside entities) _____ \$100 Fields for outside entities (Football only) _____ \$550

Texas License Peace Officer (s) _____ x \$50.00 x _____ hour = _____

(Security must be provided by the City of Hempstead Texas License Peace Officers)

Hours after Midnight _____ x \$150 per hour (No Events will be held past 2:00 A.M.) = \$ _____

FEES

Rental Fee(s) \$ _____

After 12:00 a.m. Fee \$ _____

Deposit(s) \$ _____

Security Officer(s) \$ _____

Other \$ _____

Total \$ _____



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PHONE: 979. 826. 2441

I accept full responsibility for the above group while at the requested City of Hempstead Recreation Center and agree to the charges stated above. I agree, individually and as agent for the Renting Party, to INDEMNIFY AND HOLD THE CITY HARMLESS from any and all claims and injuries to persons attending the event to be held at the City of Hempstead Recreation Center on the date(s) of rental. I agree to comply with the City of Hempstead Recreation Center Rental Policy and agree that I will ensure compliance with all Rules, Regulations or Ordinances applicable to the use of the City of Hempstead Recreation Center. By signing, states that you have received and read a copy of Rules and Regulations. The city has the rights to modify rates based on the size of the event to maintain the safety of individuals participating in events at the center. The modified rates may be based on the maximum capacity for the particular event.

*****ALL RENTAL FEES MUST BE PAID IN FULL ONE WEEK PRIOR TO EVENT OR YOUR EVENT WILL BE CANCELLED. NO REFUNDS*****

Signature: _____ Date: _____

Services: Use of facility, (Tables, chairs, are based on renters' number in attendance)

Restrooms and designated parking areas.

Extras: (Circular/seats 6 people) - \$8 dollars each, (Rectangular / seats 4 people) \$4 dollars each

Extra chairs -- \$2 dollars each

Staff setup- \$35 per hour (Minimum 1 hour if requested)

Staff breakdown- \$35 per hour (Minimum 1 hour if requested)

*******FOR OFFICE USE ONLY*******

Date: _____

Amount Total \$ _____

Amount Paid \$ _____

Total Amount Due \$ _____

Cash or Check # _____