

PRYAF RENTAL FEE SCHEDULE

1. **Times and Days Available** (except during PRYAF special events)

- 8:30 am - 1:30 pm, 7:00 PM - 10:00 PM Weekdays
- 6:00 am – 10:00PM Weekends & Holidays

2. **Hourly Rates**

- Rental rates are per hour and include time for set up, tear down and clean up.
- Minimum rental per day is 2 hours.
- Facility is available for one-time use or on an annual rental plan.
- Security Deposit is 50% of rental cost or 50% of first month's rent on annual usage. Deposit is refundable if PRYAF does not incur costs for damages to the property or extra cleaning fees due to renter spills on floors/carpets, or necessary removal of decorating adhesive.
- Use of PRYAF tables and chairs is not included unless agreed upon at the event meeting. Chairs and tables must be returned to their storage area at the end of the event. No other PRYAF equipment or technical services (such as electronic devices or setup) are provided, unless separately contracted with PRYAF. Extra cost may occur for use of chairs, tables, trash, and janitorial.

3. **Hourly rate table:**

AREA	SQ.FT.	ONE-TIME USE HOURLY RATE	ANNUAL USE HOURLY RATE (with annual application and agreement for facility use)
Front ("Drama") Room	1345	\$35	\$25
Kitchen (Art Room)	576	\$30	\$20
Auditorium-without stage area	2000	\$55	\$45
Stage (requires Auditorium Rental) *	940	\$70	\$25
Dressing ("Green") Room	720	\$20	\$15

*Use of Auditorium and Stage for performances will require PRYAF technician/manager at an additional hourly rate to be discussed before agreed upon.

4. **Common Areas (included with rental)**

Front restrooms and lobby area- access allowed

Rear restrooms-access allowed with rent of Auditorium, Stage and Dressing rooms

Rear parking lot -access allowed

We appreciate your interest in our PRYAF building and hope that it will lead to a beneficial partnership for all parties involved.



PASO ROBLES YOUTH ARTS FOUNDATION

FOUNDED BY DONNA BERG

3201 Spring Street P.O. Box 4699 Paso Robles, California 93447
Phone 805.238.5825 Fax 805.238.5937

APPLICATION FOR FACILITY USE - Execution of this rental agreement does not confirm reservation.

Please print clearly. For consideration, complete application must be submitted with appropriate security deposit payable to Paso Robles Youth Arts Foundation.

EVENT DATE(S) MONTH/DAY/YEAR: _____ DAYS(S) (Circle): Su M T W Th F Sa

ORGANIZATION NAME (If Applicable): _____

ORGANIZATION MAILING ADDRESS (If Applicable): _____

ORGANIZATION CITY/STATE/ZIP: _____

ORGANIZATION PHN: _____ FAX: _____ EMAIL: _____

RENTER NAME: _____ RENTER PHONE: _____ RENTER EMAIL: _____

RENTER'S MAILING ADDRESS: _____

RENTER'S CITY/STATE/ZIP: _____

TYPE OF EVENT: _____

PLEASE ATTACH ANY PROMOTIONAL MATERIALS AVAILABLE FOR YOUR EVENT (I.E. FLYER, POSTCARD, BROCHURE, PRESS RELEASE, ETC.)

ESTIMATED TOTAL ATTENDANCE: _____ TIME YOUR GUESTS WILL ARRIVE: _____ AM/PM

REQUEST THE USE OF THE FOLLOWING ROOMS(S) (CHECK ALL THAT APPLY):

*Times listed below must include set-up/decorating, event, and clean-up.

Studio 1 – (Drama Room), 1345 Sq. Ft.
FROM: _____ AM/PM TO: _____ AM/PM

Studio 2 – (Kitchen), 576 Sq. Ft.
FROM: _____ AM/PM TO: _____ AM/PM

Auditorium - without stage area, 2000 Sq. Ft.
FROM: _____ AM/PM TO: _____ AM/PM

Studio 5 – (Stage), 940 Sq. Ft.
FROM: _____ AM/PM TO: _____ AM/PM

Studio 6 – (Dressing Room), 720 Sq. Ft.
FROM: _____ AM/PM TO: _____ AM/PM

Please add any Additional Rooms and/or Times Needed:

ROOM NEEDED FROM: TO:

1 _____

2 _____

3 _____

OFFICE USE ONLY

Room: _____

\$ _____ X _____ hrs _____ = \$ _____

Room: _____

\$ _____ X _____ hrs _____ = \$ _____

Room: _____

\$ _____ X _____ hrs _____ = \$ _____

Room: _____

\$ _____ X _____ hrs _____ = \$ _____

Saturday Rate: \$ _____

Cleaning Fee: \$ _____

Administrative Fee: \$ _____

Estimated Total \$ _____

50% Security Deposit

\$ _____

Balance Due \$ _____

Equipment Rental:

_____ = \$ _____

_____ = \$ _____

_____ = \$ _____

_____ = \$ _____

Ending Balance

\$ _____

*Due (30) working days prior to event

QUESTIONS ABOUT YOUR EVENT

CIRCLE YES OR NO

- Y N Admission or Donation Fee? If Yes, How Much? \$ _____
- Y N Alcoholic Beverages **SERVED?** If Yes, Security & Liability Insurance Required
- Y N Alcoholic Beverages **SOLD?** If Yes, ABC License, Security, and Liability Insurance Required
- Y N Food Prepared by Renter?
- Y N Kitchen Rental Needed?
- Y N Outside Catering? Who? _____
If yes, PRYAF requires a Certificate of Liability and Proof of Workers Comp.

RENTAL CHECK LIST:

- Incident Report Form given to renter.
- Key Holder Agreement (list keys)
 - _____
 - _____
 - _____
- Acknowledgement of Key Holder
- ABC License Submitted (If Required)
- Certificate of Liability Submitted
- Other tech equipment _____
- Storage _____
- Signage or Advertising _____
- Restricted items _____
- Walk Through Notes:

PRYAF FACILITY RENTAL AGREEMENT

- 1. Paso Robles Youth Arts Foundation (PRYAF) and _____ hereby enter a facility rental agreement under the following terms and conditions: Renter has signed and submitted an Application for Facility Use.
- 2. Renter has given PRYAF a Security deposit of \$ _____ as well as the estimated rental cost based on the Application for Facility Use.
- 3. Renter understands that any extra use or charges will be invoiced by PRYAF within 10 days after the event and is due and payable upon receipt.
- 4. The Renter has received the PRYAF Facility Rental Handbook and understands that the Renter is responsible for reading and following the policies and other information contained therein.
- 5. Special Terms:

6. ENTIRE AGREEMENT: This Rental Agreement contains the entire agreement of the parties. No other agreement, statement, or promise made on or before the effective date of this Agreement will be binding on the parties.

RENTER

Company Name:

Print Name:

Organization Name/Title:

I certify under penalty of perjury that I am authorized to sign on behalf of the RENTER:

Signature of Renters Signer:

Date:

PASO ROBLES YOUTH ARTS FOUNDATION

Director's Name:

Title:

I certify under penalty of perjury that I am authorized to sign on behalf of PRYAF:

Signature of PRYAF Director:

Date:
