

Community Room Use Contract

This application form must be filled out COMPLETELY prior to the requested usage date. The Contract will be kept on file. The person filling out this application (Contact Person) must be an adult. All youth participating in the use of a SNAHC Community Room must have adult supervision at all times. All appropriate fees must accompany this application.

Contact Person _____ E-mail _____

Mailing Address _____ City _____ Zip _____

Home Phone _____ Work Phone _____

Name of Organization _____

Nature of Event (e.g. meeting, banquet, birthday) _____

Day & Date of Use _____ Anticipated Number of People _____

Location (Circle One): 3800 Florin Road 2020 J street Grant Union High School

Start Time of Event (**Includes set-up**) _____ AM / PM

Completion Time of Event (**Includes take-down/clean-up**) _____ AM / PM

Audio-visual needs (if any) _____

SNAHC is committed to providing an inclusive and welcoming environment for all community members. SNAHC reserves the right to review all membership criteria for any group to assure that it does not violate non-discrimination policies and procedures (i.e., groups must respect Federal anti-discrimination laws.)

The Sacramento Native American Health Center requires all users to be responsible for the operating rules of the Community Room, as well as for the conduct of its group or others present during the requested period. All users must abide by the applicable SNAHC policies and procedures, including the Healthy Eating Policy. The contact person acknowledges understanding of all emergency procedures, including evacuation, and is responsible for communicating emergency evacuation processes and exit routes to group members/attendees.

The contact person shall take full responsibility for undue damage and excessive dirty, or untidy, conditions to the building, adjoining room and/or equipment and furniture.

The responsibilities of the contract person include, but are not limited to:



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COMMUNITY ROOM

- 1) Supervision of all guests in the Community Room.
- 2) Damage resulting from inappropriate actions.
- 3) Soiling and/or stains caused by neglect and irresponsible action and activities.
- 4) Making sure all garbage is thrown away in garbage cans provided.

Payment of \$ _____ will be billed to the renter. Payments by be requested on a sliding fee scale depending on ability to pay.

Deposit will be collected as in-kind donation of: _____

SNAHC reserves the right to levy any fines to users for false alarms that may trigger emergency response from fire or police services. A fine of \$100 will be assessed to the main contact for every individual false alarm that occurs in a one-year period as a result of the community room use by the renter. Three or more false alarms will result in revocation of privileges for one year and an additional fine of \$300. For more information on false alarm triggers for Sacramento Police or Fire Departments, please reference each agency’s website.

The undersigned hereby agrees to be responsible for any damage to the facility occurring during and by this use and agrees to be responsible for the conduct of all persons attending this function. Applicant further agrees to be responsible for any accident or injury occurring to anyone during and by this use and agrees that the Sacramento Native American Health Center or its employees shall not be responsible for any such injury or loss.

Any violation of this contract is grounds for immediate disqual of event or groups. Groups may elect to rectify the improper conduct and will be eligible for space rental again. Two sanctions will result in termination of contract of the renter and group they are representing will be ineligible for meeting space in the future.

Name of Room Assigned for Use:

Signature(s) of Primary Renter(s) _____ Date _____

Signature of SNAHC Representative _____ Date _____

SNAHC Land Acknowledgement

The Sacramento Native American Health Center is proud to recognize this land as the unceded and ancestral territory of the Nisenan, and Miwok people. We acknowledge that these Indigenous people have never left their ancestral homelands and continue to be a part of the vibrant Sacramento community.

We are honored to continue weaving the legacy of a healthy American Indian / Alaska Native community based on cultural values delivered through a traditional, innovative, and accessible patient-centered health home for all.

For SNAHC Representative: Return completed, signed form to Community Use organization and attach completed form to the Outlook room reservation for the associated use.