Womanspace
your place

Request for Use of Womanspace Facility

Rental Considerations / Pre-Planning

Contact Info

Name of organization or individual _____

Contact person _____

Address _____

City/State/Zip _____

Work phone _____ Home Phone _____ Cell Phone _____

E-mail _____

Purpose

for which space is requested _____

_____

_____

Dates & Time

Date/s for the above space _____ Set-up hour/s _____

Actual event hours _____ Clean-up hour/s _____

Location/s Requested

(Please check all that apply)

	Abbreviations
☐ William Reif Gallery (main building, ground level)	WRG
☐ Library/Media Room (main building, lower level)	MR
☐ Grounds and Labyrinth (including back yard and deck of New Dimensions Studio)	GR-LAB
☐ Anjali Pavilion	PAV
☐ New Dimensions Studio (ground level)	NDS
☐ Whole Facility	FAC

☐ Other (describe) _____

Attendance

Estimated or actual number of persons in attendance _____

# of adults _____ # of children (under 9) _____

Media Request

☐ For *William Reif Gallery* rental: We request use of DVD player & TV . . . . . **no charge**

☐ For *Library/Media Room* rental: We request use of theater projection equipment . . . . . **$25 per day**

Price includes use of screen, projector, DVD player, surround sound, etc.
System has HDMI capability. The individual who will be operating the equipment must be trained in its use by a member of the Womanspace staff prior to the rental date.)

☐ For *Anjali Pavilion* or *Lilly Garden* rental: We request use of a portable sound system . . . . . **$10 per day**

3333 Maria Linden Dr. • Rockford, IL 61114 • 815-877-0118 tel • 815-877-0265 fax • womanspace-rockford.org

Other Please check items below and indicate quantity needed:

☐ Folding chairs ($0.50 ea.)_____ ☐ Clipboards_____ ☐ Card Tables ($1.00 ea.)_____

☐ Serving Tables 6' or 8' ($2 ea.)_____ ☐ Podium / Lectern ☐ Silverware ($0.25 ea.)_____

☐ Linens for 8' Tables - Polyester Ivory ($5 ea.)_____ ☐ Linens for Card Tables - Polyester Ivory ($3 ea.)_____

☐ We will bring in our own food ☐ We need refrigerator space

☐ We request the use of: ☐ 20-cup urn for hot water, ☐ 30-cup OR ☐ 50-cup urn for coffee* . . . .No charge

☐ Flip chart holder (no charge) . . . . . .No charge

☐ Portable projection screen. . . . . .No charge

☐ Powerpoint projector (user must be trained prior to rental) . . . . . **$25 per day**

*Coffee not included. On a separate paper, please attach a sketch or diagram of the type of setup you envision. Also indicate if a special room set-up is required (e.g., chairs around card tables; chairs set in semi-circle, etc.)

Further Considerations

Media equipment described in the WRG and MR is not movable; it may be used only in the location in which it is installed. Portable equipment includes the sound system, a projection screen, and power point projector. If a CD player is needed, renting group is encouraged to bring one.

A Womanspace staff person or representative must be on the premises during the entire time the facility is in use. No key will be given out.

An art exhibit is usually on display in the William Reif Gallery. Items on exhibit may not be taken down by a renting group. Nothing may be taped to painted walls.

Accessibility

- Main building: A ramp is available inside the garage for event access in the (upstairs) Fountain View Room.
- At present, the (downstairs) Library/Media Room can only be reached by means of a stairway.
- Studio and Pavilion: New Dimensions Studio is fully accessible as is the Anjali Pavilion.
- Gardens and Labyrinth: Our garden paths do not accommodate conventional wheelchairs; some chairs with wider wheels can access the garden. Labyrinth pathways are narrow and accommodate only able-bodied walkers.

Restrooms

- Main building: Two restrooms are available on the main floor; one is on the lower level.
- Studio: There is an accessible restroom on the main floor of New Dimensions Studio; a second restroom on the lower level is accessible by a small elevator as well as by the stairway. These restrooms are usually available for events occurring on the Anjali Pavilion as well as in the gardens and labyrinth.
- Note: Larger groups using outside locations may be required to rent a portable toilet for the duration of their visit. A preferred provider and rental information will be recommended by Womanspace.

Size of Groups

- The William Reif Gallery has seating for 24 on comfortable swivel chairs, theater style, and can easily accommodate up to 40. The conference table in this room can seat 16.
- The Library/Media Room is accessible only by stairs. This room can comfortably handle a group of up to 32 at tables, and 50 theater-style.
- The Anjali Pavilion easily accommodates 100 people, theater style.
- The New Dimensions Studio has tables and chairs and is used primarily for group work requiring art materials and workspace. It accommodates approximately 30, sometimes more (depending on the nature of the activity for which it is used).

Meals Meals may be brought in (not prepared here). All trash and recyclables must be collected and removed by the renting group. If silverware, glasses, serving dishes, etc. have been used, the renting group must load and start the dishwasher before leaving.

Cleaning Fees Renting group agrees to return rented area to its original order before leaving the premises. If the area is not left in good order, a cleaning fee of $50 will be retained by Womanspace. If the area is left in good order, the entire $50 cleaning fee will be refunded.

No smoking is permitted on the Womanspace campus.

Rental Rates

	Regular Rate	**Non-Profit Group**
Each space	$50/hour	$25/hour
Whole Facility	$200/hour	$100/hour

I request the use of (*please check all that apply*):

☐ WRG ☐ MR ☐ GR-LAB ☐ PAV ☐ NDS ☐ LAB ☐ FAC

Additional Rental Items:

☐ Sound System @ $10 ☐ PowerPoint Projection @ $25

☐ Theater Projection @ $25 ☐ Folding Chairs _____ @ $0.50 = _____

☐ Card Tables _____ @ $1.00 = _____ ☐ Serving Tables _____ @ $2.00 = _____

☐ Long Linens _____ @ $5.00 = _____ ☐ Short Linens _____ @ $3.00 = _____

☐ Silverware _____ @ $0.25 = _____

Please indicate # of each: ____ Knives ____ Dinner Forks ____ Salad Forks ____ Spoons

Your signature below indicates that you (or your organization) will assume total responsibility for adherence to the considerations listed on this document as well as for any damage to the facility or its contents, or any loss by theft as a result of your group's presence:

Signature: _____

Date: _____

If we have no additional questions and your request is approved, you will receive a written confirmation by mail (or email) & a contract within one week of receipt of this form. Once your request is approved, you must submit a deposit for 50% of your projected cost, plus (refundable) $50 cleaning fee. (See cost workbox to the right.) Balance of your payment is due one week prior to rental.

At your earliest convenience, please return this completed form to:

Womanspace, Attn: Liz Hiemstra, 3333 Maria Linden Dr., Rockford, IL 61114

or fax: 815-877-0265

or e-mail: liz@womanspace-rockford.org

Cost Workbox:

A) # of spaces _____

B) **x** dollar rate _____

C) **x** # of hours _____

D) Subtotal (***A***x***B***x***C)***: _____

E) + Add'l rental _____

F) Subtotal (***C+D)***: _____

G) **x** 50% of of ***C:*** _____

H) + $50 refundable cleaning fee _____

I) Subtotal of ***F+G:*** _____
(This is your deposit amout)

J) TOTAL _____

The above amount (H) is due upon approval of this request. When approval is granted, you will receive a contract. Please sign the contract and return with your check, made payable to: Womanspace

Balance will be due one week prior to rental.

Womanspace
your place

Contract for Use of Womanspace Facility

Approval is hereby granted for:

Individual/Group _____

to use Womanspace ***as described in the attached document*** on the date/s listed:

_____

at a cost of _____

Deposit of _____ must be paid to Womanspace by _____
date

Balance of _____ must be paid to Womanspace by _____
date

☐ Refundable cleaning deposit of $50 must also be submitted with this contract.

☐ If checked, proof of insurance, naming Womanspace as additional insured, is required by renting group.

Your signature below indicates that you (or your organization) will assume total responsibility for adherence to the considerations listed on this document as well as for any damage to the facility or its contents, or any loss by theft as a result of your group's presence:

Signature _____ Date _____

Approved by: _____ Date _____
For Womanspace

SAMPLE