Catoosa County Schools Performing Arts Theater Ringgold High School

29 Tiger Trail • Ringgold, GA 30707 • Phone: (706) 935-2254 • Fax: (706) 965-8910 Contact Connie Coker at coker.rhs@catoosa.k12.ga.us for Theater booking and information

Performing Arts Theater Facility Use Contract

Mailing Address:	Telephone Number:			
City:	State:	Zip:		
Contact Person:		Day Phone:		
Email:		Evening Phone:		
Event Name:				
Describe Event or Activity:				
Energy Management System will control heat an	nd air conditioning to the schedule	below. Accuracy of time so	chedule is critical.	
Date(s) to Reserve Facility:				
Time: am / pm to	am / pm			
Performance Information: Date	Time:	am / pm to	am / pm	
Terms of Use • Basic fee for facility is \$100 per hour. (Minim • Non-profit organization basic fee for one day event, non-profit organizations are also required provided. • Lighting technician, sound technician, and sec organized prior to event. Custodial services are • Adequate security must be provided. Security run through payroll. • A deposit or \$100 is expected with the submis a date for a maximum of 14 days. At the time of • Extended use event (more than one day) fee is • If user is not Catoosa County Public Schools r • All organizations utilizing the Performance Identify and Describe Services Needed	use is \$50 with an additional \$100 lto pay for custodial, security, and curity services are charged at the racharged \$25 per hour. All county personnel can be supplied at the rassion of the contract. Contracts subfreservation, only an estimate of to \$800 per day.	Ate of \$25 per service hour per employees must be run throughte of \$25 per hour per person mitted without a deposit can otal cost can be determined.	Profit status means 501-3C must be person. Services are to be agh payroll. n. All county employees must be	
Lighting Technician Services Needed:				
Sound Technician Services Needed:				
Custodial Services Needed:				

Referei	nces: (if requested)			
Address: Home Phone: Business Phone: 2. Name: Address: Home Phone: Business Phone: 3. Name:	Name:			
	Address:			
	Home Phone:			
	Business Phone:			
	Name:			
	Address:			
	Home Phone:			
	Business Phone:			
	Name:			
	Address:			
	Home Phone:			
Business P	Business Phone:	Phone:		
equipm Distric during Distric unders fees cha informa	t, the Catoosa County Board of Education or be caused in any way by the use of the tfor any damages done to the building of tand that both the group/organization re targed and supervision of the event and f	acation, does hereby agree to indemnify on, and any of its agents or employees f e facility. The undersigned specifically or any claim of damages made by some equesting use of the performing arts cen- for any and all damages to any facility of crate and that, if approved, I will abide	y and hold harmless the Catoosa County School from any and all loss or damage that may arise agrees to indemnify the Catoosa County School one else arising out of use of the facility. I inter and I, individually, am responsible for the	
agree	to the responsibilities stated above	Signature	Date	
		Signature	Duic	
	office Use:			
Amoı	unt of deposit paid: \$		date paid:	