



Glenn & Viola Waters Cultural Arts Center
527 East Main Street, Hillsboro OR 97123
503-615-3485 (office) 503-615-3484 (fax)

Date Received _____

Facility Application

Thank you for your interest in the Glenn and Viola Walters Cultural Arts Center. Completing and submitting this application is the first step in the booking process. Approval of this application will be followed by the appropriate Agreement (contract). **PLEASE PRINT**

Name of organization or individual: _____

Person Supervising Activity: _____

Phone: _____ Cell: _____ E-mail: _____

Address: _____ City: _____ State: ____ Zip: _____

If you are an organization, is your organization: Non-Profit: Private/Commercial:

Title/Type of Event: _____

Is this event for an adult (21 or older) ____ or for a minor (under 21)? ____ (Please check only one.)

Maximum Attendance: _____ How did you hear about the Center? _____

Please check all that apply:

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> Theater/Event Space | <input type="checkbox"/> Kitchen/Concessions | <input type="checkbox"/> Chairs _____ |
| <input type="checkbox"/> Theater Lighting | <input type="checkbox"/> Art Gallery/Lounge | <input type="checkbox"/> Tables _____ |
| <input type="checkbox"/> Arts/Classroom | <input type="checkbox"/> Piano | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> South Terrace | <input type="checkbox"/> East Lawn | |
| <input type="checkbox"/> Sound/Describe: _____ | | |

Date(s) of use: _____ (First Choice) _____ (Second Choice)

Rental Start Time: _____ Event Start Time: _____ Rental End Time: _____

***Include set up and clean up time in your request.**

Total Hours of Use: _____ Hours Alcohol to be Served: _____ (Alcohol service limited to a total of no more than 4 hours during rental)

Describe type of event in as much detail as possible (include any equipment needs or equipment to be brought in:

Will this be a ticketed event? Yes No Open to the Public? Yes No
Dance Floor? Yes No
Will any fees be charged (e.g., admission fee, sale of food or alcohol, request for donations)?
Yes No If so, describe:

Will alcohol be served? Yes *Alcohol must be served by licensed bartender provided by a caterer. No

Will a caterer be used? Yes No Caterer Name/Phone No. _____

Will you have a DJ? Yes *DJ required to stop playing at least one hour prior to end of rental. No

Insurance

User shall be required to purchase a Tenant User Liability Insurance Program Certificate of Insurance (TULIP) through the City of Hillsboro at www.ebl-ins.com/tulip (Facility Code 0501-AAX). *There are no exceptions to this requirement for individual renters (e.g., weddings, anniversary parties, etc.).* Corporations and other organizations that can provide the required insurance (as per the Cultural Arts Center's Policies for Use) for corporate events may do so through their own insurance company, upon approval of the Cultural Arts Program Manager. Otherwise, they will have to purchase insurance through the TULIP program.

OTHER ACTIVITIES

Will the following occur at your event (if yes, please describe):

- Cooking outside of the kitchen or outdoor BBQ equipment: _____
- Use of tents, canopies, or other temporary structures: _____
(Requires permit from Hillsboro Fire Department)
- Use of decorative materials hung from walls or suspended from ceilings, particularly combustible materials: _____
- Use of candles, heating appliances, or other open flame: _____
(Requires permit from Hillsboro Fire Department)

I have read and agree to abide by the regulations established for use of the Glenn and Viola Walters Cultural Arts Center. I attest that the information provided in this application is true and complete to the best of my knowledge. I agree to disclose any changes to this information and all of the details of my event to Center staff in order to comply with facility rental policies. I agree to be solely and completely responsible for the condition of the facility and to leave the building, equipment and grounds used in neat and clean condition, without damage. I agree to promptly reimburse the City for all damages.

Applicant Signature: _____ Date: _____