



FACILITY RENTAL APPLICATION – FALKIRK CULTURAL CENTER

1408 Mission Avenue at E Street, San Rafael, CA 94901 • (415) 485-3328 • www.FalkirkCulturalCenter.org

Please review all rules and regulations in our Rental Information Packet & Clean-up Requirements Checklist prior to completing application. Return your completed and signed Rental Application & Clean-up Requirements Checklist to Falkirk Cultural Center by email at Falkirk.rentals@cityofsanrafael.org, by USPS mail, or drop-off in-person at Falkirk.

Name of Rental Applicant (please print clearly)	Home Phone	Work Phone	Cell Phone #
Address	Street	City	Zip Code
Organization Name (if applicable)	Address	Phone	

If your event is a wedding, first & last names of couple _____

Primary e-mail address of Rental Applicant (To receive copy of contract by email): _____

Designated Event Representative (Person attending the day of event as point of contact for Falkirk staff, if Rental Applicant will not be present):

Name _____ Phone _____

Type of Event (e.g., Wedding, Reception, and Family Reunion; if Party, Celebration, Workshop, etc., please be specific when describing): _____

Date(s) of Event: _____ **Day (check one):** Mon Tues Wed Thurs Fri Sat Sun

Rental Hours (include set-up & clean-up time): Start of Rental: _____ End of Rental: _____

Start time of event: _____ **End time of event:** _____

Minimum Number of Attendees: _____ **Maximum Number of Attendees:** _____ **# Minors:** _____

PAYMENT INFORMATION FOR \$500 DEPOSIT: Accepted forms of payment: **Credit Card** **Cash** **Check** (payable to "City of San Rafael")

When paying by credit card, list appropriate name & phone for staff to call for card details: _____

<p>REQUIRED INFORMATION (check Y or N)</p> <p>Are you a non-profit? YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>If YES. Non-profit # _____</p> <p>Is the event a fundraiser? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Will you sell any items? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Admission fee/donation requested? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Is the event open to the general public? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Will alcoholic beverages be sold? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>→If yes, ABC License will be required. Please ask Falkirk staff for letter to submit to ABC Board of California. License must be received by Falkirk staff no later than 2 weeks prior to event date.</p> <p>Will you have amplified music? YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Will alcoholic beverages be served? YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Insurance (please check one)</p> <p><input type="checkbox"/> Will provide own insurance</p> <p><input type="checkbox"/> Will purchase insurance through City of San Rafael</p>	<p>INFORMATION REGARDING YOUR TENTATIVE PLANS (not required)</p> <p>Optional Falkirk equipment you would like to use:</p> <p><input type="checkbox"/> Projection Screen <input type="checkbox"/> Grand Piano <input type="checkbox"/> #_____ Fans</p> <p><input type="checkbox"/> Falkirk Chairs <input type="checkbox"/> Falkirk Banquet Tables <input type="checkbox"/> #_____ Easels</p> <p>Intended Use of Event Space: (Check box and check which type of use)</p> <p style="text-align: center;">Ceremony Seated Dining Buffet Reception</p> <p><input type="checkbox"/> Wedding Lawn</p> <p><input type="checkbox"/> Rose Garden</p> <p><input type="checkbox"/> Verandah</p> <p><input type="checkbox"/> Parlor</p> <p><input type="checkbox"/> Formal Dining Room Buffet Dessert Other</p> <p>Will outdoor electricity be required for your event?</p> <p><input type="checkbox"/> Wedding Lawn Front of Lawn Back of Lawn Both</p> <p><input type="checkbox"/> Rose Garden</p>
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RELEASE AND HOLD HARMLESS AGREEMENT

The applicant, in consideration of the rental aforementioned facilities and equipment, agrees to indemnify and hold harmless, and to release, waive and discharge the City of San Rafael and its officers and employees, from any and all liability for any injury or property damage arising out of or in any way connected with the rental of the facilities and equipment under this contract, including injuries and property damage due to the active or passive negligence of the City, its officers and employees. I HAVE READ THE ABOVE RELEASE AND HOLD HARMLESS AGREEMENT AND FULLY UNDERSTAND THAT I ASSUME ALL RISKS FOR ANY INJURIES AND PROPERTY DAMAGE SUFFERED.

- I have read the terms and provisions on this application and the rules and regulations which are incorporated herein by reference and agree to be bound thereto.
- I have read and agree to abide by the Cleaning Requirements Checklist

Applicant Signature _____ Date _____