



CONTACT INFORMATION:

Contact Name: _____ Organization Name _____
Address: _____ City: _____ State: _____ Zip: _____
Contact Phone Number _____ Contact Cell Number _____
Alternate Contact Name _____ Phone _____
*ALL contacts listed must be present during rental. Email _____

RENTAL INFORMATION:

Type of Event _____ Purpose of Event _____
Date of Rental: ____/____/____ Day of Week: M Tu W Th F Sa Su
Rental Start Time: ____:____ am/pm Rental End Time: ____:____ am/pm
All evening and weekend rentals require a 2 hour minimum.
Number of Guest Expected: _____ (*Maximum capacity will depend on facility)

FACILITY REQUESTED:

Heritage Professional Center (HPC)

- _____ Open Area (Capacity 68/ small counter area)
- _____ Kitchen (Includes minimal counter area, stove and refrigerator)
Additional \$25 fee required. **SEPARATE RESERVATION IS REQUIRED.**

The Heritage Professional Center is located at 24023 Lockport Street, Plainfield, IL 815/254-2992

Rec/Admin Center (RAC)

- _____ Meeting/Training Room (Capacity 20)
- _____ Kitchen-includes minimal counter area, stove and refrigerator.
Additional \$25 fee required. **SEPARATE RESERVATION IS REQUIRED.**
- _____ Projector- Additional \$10 fee required

The Rec/Admin Center is located at 23729 West Ottawa Street, Plainfield, IL 815/436-8812

FACILITY REQUESTED (CONT.)

Plainfield Township Community Center Rental (PTCC)

*Each Room is a separate fee, please see fee structure

- _____ Multi-purpose Room A (Capacity 125 depending on seating/ max cap. w/ tables and chairs is 59/ small counter area)

- _____ Multi-purpose Room B (Capacity 120 depending on seating/ max cap. w/ tables and chairs is 55)
- _____ Multi-purpose Room A & B (Capacity 240 depending on seating/ max cap. w/ tables and chairs is 115)
- _____ Kitchen area includes use of refrigerator, stove and serving area
Additional \$25 fee required. **SEPARATE RESERVATION IS REQUIRED.**

PTCC is located at 15014 South Des Plaines Street, Plainfield, IL 60544 815/267-3350

EVENT NEEDS:

Rental fee includes 15 min. set up before & 15 min. clean up after

Tables and Chairs

6 ft. tables/Quantity _____ availability depends on facility Chairs/Quantity _____

**IN THE BOX PROVIDED PLEASE INDICATE
HOW YOU WOULD LIKE THE CHAIRS/TABLES
SET UP FOR YOUR EVENT.**



RENTAL FEES:

Rental Room Fee	\$ _____	*SEE DEFINITION OF TERMS FOR RATE CATEGORY
+ Rental Deposit	\$ _____	
+ Additional Needs	\$ _____ (Kitchen, projector)	
+ Additional Supervision	\$ _____	
+ Security Staff	\$ _____	
TOTAL RENTAL COST	\$ _____	

RENTAL POLICY & PROCEDURES

Applicants are required to abide by the specific rules of the application as well as other Park District and local ordinances. Failure to comply may result in the cancellation of the application, groups fees; cancellation of any current or future permits; and/or Law Enforcement officials may be called. The Facility and Shelter Use Rules and Regulations include, but are not limited to:

- Groups wishing to utilize a shelter or facility must acquire a permit from the Park District. The permit must be available during use and presented to any Park District representative upon request.
- It is the responsibility of the Group and/or the individual identified as the person in charge of the permit to enforce the rules and regulations regarding the conduct of the group while using Park District facilities. Including, but not limited to:
 1. Park District staff **MUST** be respected and obeyed at all times.
 2. Any activities deemed inappropriate and indicated by the Park District staff are prohibited.
 3. The Park District cannot be held responsible for lost, stolen or damaged property.
 4. The building and all equipment must be used and treated appropriately

5. The rental must take place as described on the application, including the type of activity and the number of guest/participants.
 6. Under age children must be supervised at all times.
 7. Rental space is limited to the space specified in the rental agreement or permit.
 8. Alcohol is only allowed by special permit and all qualifying conditions must be met.
 9. Illegal substances are strictly prohibited.
 10. Firearms are prohibited on any Park District property.
 11. No smoking is allowed in any indoor Park District Facility. Smoking is allowed in designated areas only pursuant to Smoke Free Illinois Act (410 ILCS 82/) and Park District Ordinances.
- Facility and Shelter use begins and ends at the times stated on the permit, including set-up and clean up. Groups are not allowed on site prior to the start time on the permit and are required to exit the facility and have adjacent areas cleaned up at the ending time indicated on the permit. If reservation exceeds the time on the permit it may result of not receiving security deposit, fees will be adjusted accordingly. Check your permit for specific times you may access the facility or shelter. All litter must be picked up and placed in trash cans after each use.
 - Permits are not transferable. All users will ensure that no unauthorized third party is granted permission to use the facility or shelter without Park District approval.
 - Parking is allowed in designated areas only. Vehicles are not allowed on Park District property, other than parking lots, without written permission noted on the permit issued by the Park District. User groups must inform their participants and spectators to park in facility parking lots and public parking areas. Renter shall be responsible for any damage to Park District property caused by the failure of User or Group to comply with this provision.
 - Selling food or other items is not allowed without Park District approval and is subject to all county and state guidelines.
 - The display or distribution of handbills, pamphlets, flyers, signs, or any other printed material containing advertising matter, information, or announcements is prohibited on Park District property without permission of the Park District.
 - Amplified sound is not allowed in any facility or shelter without Park District approval. All local ordinances are also applicable.
 - Permit holders shall inspect the facility prior to and subsequent to each use to identify any dangerous or unsafe condition and to determine whether the facility is safe and appropriate for any planned activity.
 - Permit holders shall promptly advise the Park District of any perceived dangerous or unsafe condition.
 - The use of the Park District Name, Logo, or likeness without express written permission of the Director of Recreation is prohibited.
 - All Ordinances of the municipality in which the facility is located are applicable.

Appropriate applications are to be completed for rentals of park district space and may include additional rules and regulations.

Facility Rental Rates						
All Rates are per hour-Additional charges may apply						
Rate Category	B & C (Government Agency & R Non Prof)		D & E (Resident & Resident Business)		F (Non-Resident)	
Facility	Mon-Fri before 4:30p	M-F after 4:30 Sat-Sun	Mon-Fri before 4:30p	M-F after 4:30 Sat-Sun	Mon-Fri before 4:30p	M-F after 4:30 Sat-Sun
Heritage Professional Center						
Open Area	\$30.00	\$40.00	\$40.00	\$50.00	\$50.00	\$65.00
Multi-purpose Room	\$20.00	\$30.00	\$30.00	\$40.00	\$40.00	\$50.00
Recreation/Administration Center						
Training Room	\$20.00	\$30.00	\$30.00	\$40.00	\$40.00	\$50.00
Plainfield Township Community Center						
Meeting Room	\$30.00	\$40.00	\$40.00	\$50.00	\$50.00	\$65.00
Multi-purpose Room A	\$30.00	\$40.00	\$40.00	\$50.00	\$50.00	\$65.00
Multi-purpose Room B	\$30.00	\$40.00	\$40.00	\$50.00	\$50.00	\$65.00
A & B	\$50.00	\$70.00	\$70.00	\$90.00	\$90.00	\$115.00
Rate Category Descriptions						
NO Charge	Park District Programs					
B:	Government Agencies					
C:	Resident Non-Profits					
D:	Resident					
E:	Resident Businesses					
F:	Non-Resident					
Additional fees may apply if any additional services or staffing are deemed necessary by Park District staff.						
Kitchen Usage	\$25 per rental					
Projector (RAC / Training Room)	\$10 per rental					
Addtl building staff for parties over 100	\$20/hour					
Security Staff	Direct Cost plus 25%					
Fundraising or Special Use permit	\$50 and Executive Director Approval					
Refundable Security Deposit	\$100					

DEFINITIONS OF TERMS

Businesses or Corporations –Maintain an address of record within the Park District boundaries

Government Agency – Any other local taxing body to which any residents of the Park District also pay a portion of their tax bill.

Non-Resident status is defined as individual, business, group, or organization whose address of record is outside Park District Boundaries. Utility Bill or Photo ID will be required by Park District staff to verify status.

Park District activities and programs – All programs and offerings of the Park District independently or in partnership with a contracted party.

Resident is defined as individuals, groups, or organizations whose address of record is within Park District Boundaries. Utility Bills or Photo ID will be required by Park District staff to verify residency status.

Resident non-profit organization - To qualify as a Resident Non-Profit user, an organization must maintain an address of record within the Park District's Boundaries and be registered as a not-for-profit organization with the State of Illinois or Federally. Proper supplemental proof will be required.

ACKNOWLEDGMENT OF RENTAL REQUEST POLICY & PROCEDURES

I certify that all of the information I provided on this form is true and correct. I understand that Plainfield Park District may verify this information and that misrepresentation may result in the denial of a rental or additional fees.

Signature: _____ Date: ____/____/____

For office use only:

Reservation #	Rental Fee:	Additional Fee:	Deposit Due:	Total Amount Due:
Reserv # _____				
Room Reserved <input type="checkbox"/>	Kitchen Reserved <input type="checkbox"/> Reserv # _____ *If Kitchen is used but not reserved by renter this will be deducted from deposit, renter must initial _____			Total Amount Paid: _____
Requires Special Use Permit? Yes <input type="checkbox"/> No <input type="checkbox"/>				
Facility Manager Signature: _____		Date Approved: ____/____/____		Initials: _____
If not, please specify: _____				
Application Approved: Yes <input type="checkbox"/> No <input type="checkbox"/>		Date Approved: ____/____/____		Initials: _____
<input type="checkbox"/> SCAN/EMAIL COPIES TO FACILITY, FACILITY MANAGER, FRONT DESK SUPERVISOR <input type="checkbox"/> COPY GIVEN TO RENTER <input type="checkbox"/> ORIGINAL IN FACILITY BINDER				
Deposit Refunded	Deposit Withheld:	Reason Deposit Withheld:		
<input type="checkbox"/> ____ (Initials) ____ Date ____ Approved by	<input type="checkbox"/> ____ (Initials) ____ Date ____ Approved by	_____ _____ Staff Signature: _____		