



Community Room Request and Agreement Form

PSF is a non-profit community organization formed to provide educational and community services that strengthen Boston's diverse Allston-Brighton neighborhood.

I. Your Information:

Name of Requesting Organization/Group/Individual: _____

Address _____

City/Town _____ State _____ Zip Code _____

Primary Contact's Name: _____ Title: _____

Phone: (____-____-____) E-Mail : _____

Organization/Group Description: _____

_____ Non-Profit(*check one*): Yes No

PSF or Tenant Affiliation (*check one*): Yes No If Yes, explain _____

II. Room Request Details:

Date Requested: _____ Start Time: _____ am/pm End Time: _____ am/pm

Recurring Schedule (*check one*): Yes No If Yes, describe schedule: _____

Community Rooms use hours limited to 8:00 am - 10:00 pm Sunday-Thursday, 8:00 am - 11 pm, Friday and Saturday. Closed on all major holidays. Please include sufficient time for set up and clean up during use hours.

Describe Planned Event/Activity: _____

Primary Purpose (*check one*): Educational Entertainment Business Social Other _____

Anticipated Attendance (#): _____ Anticipated Allston-Brighton Residents (#): _____

Will Children (<18) attend (*check one*): Yes No Will Seniors (>64) attend (*check one*): Yes No

Will the Event/Activity support low-income or underserved populations (*check one*): Yes No

If Yes, describe _____

Will you charge to attend (*check one*): Yes No If Yes, describe: _____

Will you advertise your event (*check one*): Yes No If Yes, describe: _____

Subject to Availability

Tables requested (#): _____ Chairs requested (#): _____ Car Parking spots requested (#): _____

Kitchen Needed (*check one*): Yes No If Yes, describe: _____

III. Community Room Rules:

- Community Room(s) will not be used for any purpose that violates any local, state or federal law. Community Room(s) will not be used for any purposed that discriminates on the basis of race, color, religion, sex, sexual orientation, gender identity, national origin, handicap, or veteran status.
- Smoking is prohibited in the facility or anywhere on the property except for designated areas.
- Alcohol is prohibited on the property unless being served by a licensed caterer/bartending service. The company must provide PSF with a Certificate of Insurance and a copy of their permit for serving/selling alcohol at least one week prior to an event.
- Inflatables of any kind (e.g., bouncy houses) are prohibited inside or outside the building and property. This does not include decorative balloons.
- No animals (except for service animals) of any kind are permitted inside in the facility.
- Permission to use a Community Room is limited to a specified Community Room, parking for cars when available, common areas of access and egress, and common restrooms located next to the Community Rooms. Users of a Community Room are prohibited from using other areas of the facility and property including the playground operated by Little Sprouts.
- Permission to use a Community Room is subject to the discretion of PSF, and does not create any form of tenant rights. PSF reserves the right to revoke any permission to use a Community Room without advance notice if PSF determines that the users of a Community Room have violated any applicable rule or law, or have otherwise posed a material threat to the facility and equipment or to the safety of persons in the facility.
- IN NO EVENT SHALL PSF BE LIABLE TO ANY ORGANIZATION/GROUP/INDIVIDUAL RELATED TO THE APPROVAL OR DENIAL OF A REQUEST TO USE A COMMUNITY ROOM, OR RELATED TO ANY DAMAGE OR LOSS TO ANY ORGANIZATION/GROUP/INDIVIDUAL RESULTING FROM THE USE OF A COMMUNITY ROOM, WHETHER IN CONTRACT OR TORT (INCLUDING NEGLIGENCE), REGARDLESS OF WHETHER SUCH DAMAGE OR LOSS WERE FORESEEABLE OR WHETHER PSF WAS ADVISED IN ADVANCE OF THE POSSIBILITY OF SUCH DAMAGES.
- Organization/Group/Individual completing this form assumes full responsibility for the conduct of all persons in attendance at the program/event and for any damage done to any part of the PSF facility or equipment related to the activity/event.
- Organization/Group/Individual agrees to release, hold harmless, and indemnify PSF, its agents, directors, and employees from and against any and all claims that may be made by the Organization/Group/Individual or any third-party against PSF or the Organization/Group/Individual for any losses, liabilities, costs (including reasonable attorneys' fees) or damages arising out of the request to use a community room, or the use of a community room by the Organization/Group/Individuals or persons who attend the activity/event.

By my signature below, I confirm that I understand and agree to all of the Community Room Rules listed above, and that all of the information on this form is correct.

Signature: _____ **Title:** _____

Print Name: _____ **Date:** _____

Rates and Deposit: To secure the room for an event/function, a \$100 deposit **MUST** be made with this form or at least 14 business days prior to the requested activity/event date. If PSF approves your request, PSF will send you a bill for the rental fee for the requested Community Room use based PSF's Community Room guidelines. You will be required to pay the total rental fee as determined by PFS no later than five business days before the scheduled event. Payments may be made by cash, money order or check made out to Presentation School Foundation, or by credit/debit online at www.psf-inc.org.

CANCELLATIONS: Your \$100 deposit will be forfeited if you cancel your activity/event less than five business days before the scheduled date.

FOR OFFICE USE ONLY

Request Approved Denied By: _____ Date: _____ Notification Date: _____

\$100 Deposit Received Date _____ Full Cost for rental: _____ Full Cost Received Date _____

Special Requests: _____