

JKAA Conference Room Rental Application

This Agreement made and entered on the _____ day of _____, 20____
 by and between the Jack Edwards National Airport Authority referred to as ("JKAA"),
 and _____, referred to as ("User.")

Name of Event: _____ **Expected Attendance:** _____

Purpose of Event:

Date(s) of Event: _____ Time(s) of Event: _____

Day/Time IN: _____ Day/Time OUT: _____

Set-up Time IN: _____ Breakdown Time OUT: _____

User:

Airport tenant: YES NO N# _____ Work: _____

Contact Person: _____ Mobile: _____

Fax: _____

Mailing Address: _____

City, State, and Zip: _____

<u>Room Rental Fee:</u>	<u>No. of Hours/ Day(s) Requested</u>	X	<u>Rate</u>	=	<u>Total</u>
	_____	X	_____	=	\$ _____
	_____	X	_____	=	\$ _____
	_____	X	_____	=	\$ _____
	_____	X	_____	=	\$ _____
	_____	X	_____	=	\$ _____
			Room Rental Sub-Total	=	\$ _____

Signature on this Rental Application constitutes an Agreement to abide by the terms and conditions outlined herein. Submission of this Rental Application does not automatically grant approval for use of the room. You will be notified when your Rental Application has been approved. This Agreement is considered a request; once the Agreement is signed by the JKAA the Agreement becomes binding. JKAA reserves the right to refuse use of a room for any activity that is deemed in violation of the JKAA Conference Room Use Policy, federal, state or local laws, codes or ordinance or for demonstrated past failure of the User to comply with the rules and regulations.

By signing this Agreement you agree to indemnify, defend and hold harmless the Jack Edwards National Airport Authority and their respective directors, and employees from and against any and all suit claims, losses, injuries, penalties, demands, expenses, or judgments arising from or in connection with the requested use of the conference room.

The person executing this Rental Application represents that he/she has authority to execute this Agreement on behalf of the User and is responsible for the payment set-up, clean-up, and overall supervision of the room.

Signature: _____ Date: _____

Title: _____

For Administrative Use Only

Method of Payment: Check or Money Order - Make payable to: Jack Edwards National Airport Authority

M.O.P: _____ Date: _____ Received by: _____ Amount \$ _____

Room Inspection Comments:

_____ Decorations/Client property removed _____ Photos of damage attached

_____ Debris removed from tables, chairs and floor

Condition of Room:

Inspected By: _____

Comments: _____

Schedule of Rental Rates

	Max # of Occupants	% Day (4hours)	Full Day (8hours)
Airport tenant	28	\$0	\$0
Non tenant	28	\$75	\$150

Services and Other Fees

- **JKAA conference room is only available during normal business hours, 8a.m. - 4p.m. Monday – Friday**
- **Damage Fee:** User will be charged for any damage to, or relocation of Airport Property.
- **Returned Check Fee:** \$25 per returned check
- This self-serve conference room features an executive conference table with seating for 12 and a room seating capacity of 28.
- Features for this room include wireless Internet, LAN line connection, a Polycom hands free conference phone and a 52" wall mounted flat screen TV with computer generated presentation capabilities. Other features include a wet bar, refrigerator, coffee maker and ice is included.

Airport ten
Non Tenan