

# Dining Hall Facility Rental Form

Capacity: holds up to 150 persons.

This building requires: Credit Card Authorization form on file.

Req #: \_\_\_\_\_  
Vendor #: \_\_\_\_\_



## CONTACT INFORMATION

Lessee Name		Tribal Department		Tribal ID Number	
Street Address		City	State	Zip Code	
Work Phone	Cell Phone		Email		

## PURPOSE OF REQUEST

Event Name/Description		# of Guests	# of Tables	# of Chairs
Date of Event	Set-up Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Event Time <input type="checkbox"/> AM <input type="checkbox"/> PM	End Time <input type="checkbox"/> AM <input type="checkbox"/> PM	
Additional Dates		Start Time <input type="checkbox"/> AM <input type="checkbox"/> PM	End Time <input type="checkbox"/> AM <input type="checkbox"/> PM	

## FACILITY RENTAL TERMS

**No overnight rental.** Lessee assumes responsibility for all equipment borrowed during your rental agreement, including but not limited to tables and chairs.

## MANDATORY WALKTHROUGHS

Pre-walkthrough and post-walkthrough must be signed by Lessee and staff member

## KEY CHECK OUT AND RETURN PROCESS

Key is checked out at a mandatory pre-walkthrough and return at mandatory post walkthrough.

**NOTE:** Approximate cost to re-key *Mission Highlands* by Everett Safe & Lock is \$355.

## CREDIT CARD AUTHORIZATION

In the event of an unsatisfactory walkthrough, the lessee will be informed of any issues, an itemized invoice will be generated, and the card will be charged for the invoiced amount. Once a satisfactory walkthrough is completed, the credit card authorization form will be shredded. I authorize Tulalip Tribes to charge the credit card on file in alignment with Tulalip Tribes Facilities Policy and Regulations section F. Payment ii. (1), (2).

## AGREEMENT

This agreement may not be assigned or transferred, nor may the facilities be sublet or used by anyone other than the lessee. I have read and understand this agreement and the *Tribes Building Use Policy*, which by reference is a part of this agreement. I agree to be bound by them.

Date	Lessee Signature <div>Please allow 48 hours to process</div>
Date	Approver Signature

# Dining Hall Key Sign Out



Item Number: \_\_\_\_\_

## CHECK OUT

Date	Lessee Name (Printed)	Lessee Signature
Date	Staff Checking Out Key	Staff Signature

## RETURNING

Date	Lessee Name (Printed)	Lessee Signature
Date	Staff Member Signature	Time

(MUST HAVE BOTH PARTIES SIGNATURES)

AREA	DESCRIPTION	PASS	FAIL	NOTES
Kitchen Area	Sinks, Prep Tables & Counters			
	Trash			
	Sweep			
Meeting Room(s)	Trash			
	Wipe Down Tables			
	Sweep			
Hallways	Sweep			
Exterior Deck(s) Front & Back	Trash			
	Sweep			
	Garbage Removed			
Restrooms	Trash			
	Floors			
	Sinks & Counters			

## WALK-THROUGH

BEFORE	DATE	AFTER	DATE
Staff Signature		Staff Signature	
Lessee Signature		Lessee Signature	

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Tulalip Tribes Facility Rental Indemnification Agreement

Lessee will defend, indemnify and hold Lessor, Tulalip Tribes, harmless against all claims and demands for loss or damage, including property damage, personal injury and wrongful death, arising out of or in connection with the use and occupancy of said premises by Lessee or any other person claiming by, through or under Lessee, or any accident or fire on said premises cause by the act or neglect of the Lessee, his/her guests or invitee's or any nuisance made by Lessee, his/her guests or invitee's or suffered thereupon or any failure by Lessee to keep said premises in a safe condition, and will reimburse Lessor for all its costs and expenses, including reasonable attorney fees, incurred in connection with the defense of any such claims, and will hold all goods, materials, furniture, fixtures, equipment, machinery and other property whatsoever on said premises at the sole risk of Lessee and hold Lessor harmless from any loss or damage thereto by any cause whatsoever or caused thereby.

Lessee:

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Print Name

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Date:

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Signature



## Credit Card Authorization Form

Please fill out all fields completely. This authorization allows access to the facilities and will remain valid until a satisfactory post-walkthrough is conducted with the lessee. The card will not be charged unless there is an unsatisfactory walkthrough, which occurs if the lessee fails to fulfill the responsibilities outlined in the rental paperwork and explained to them during the pre-walkthrough.

In the event of an unsatisfactory walkthrough, the lessee will be informed of any issues, an itemized invoice will be generated, and the card will be charged for the invoiced amount. Once a satisfactory walkthrough is completed, this form will be shredded.

### CREDIT CARD INFORMATION

☐ Mastercard ☐ Visa ☐ Discover ☐ AMEX

Cardholder name (as shown on the card)

Card number

Expiration date (MM/YY)

/

Security Code

Cardholder ZIP Code

I \_\_\_\_\_ authorize Tulalip Tribes to charge my credit card above in alignment with Tulalip Tribes Facilities Policy and Regulations section F. Payment ii. (1), (2)

Date

Signature

## CLEANING TASK AND GUIDELINES

### Kitchen

- Clean out and Wipe down sinks
- Wipe down all counter spaces
- Wipe down stoves
- Sweep entire floor
- Mop if needed
- Take all garbage to outside cans
- Place new garbage liners in each can

### Dining area

- Wipe down tables and chairs
- Fold and put away tables and chairs
- Dust mop entire floor and
- Mop if needed
- Take out garbage
- Replace garbage liners

### Restrooms

- Take out garbage
- Replace garbage liners
- Sweep and mop

### Miscellaneous

- Wipe up and spills around facility (spills on floor, tables, and walls)
- Vacuum rugs by doors
- Make sure doors and windows are locked
- Please remind smokers to dispose in proper container not on ground
- Pick around front area if your party drops anything on the outside

### Supplies

- Supplies for use will be in closet
- Mops and mops buckets are in the kitchen near the sink
- Use outside can for all garbage

### Decorations:

Please do not use the following items when decorating:  
staples, nails, screws, hooks, glue, sticky tape, double-sided tape or any devices  
that may cause damage to the interior or exterior of the facility.

Renter's signature \_\_\_\_\_

Date \_\_\_\_\_

Employee's initials copy where made: \_\_\_\_\_