Equipment Rental Form

This building requires: Credit Card Authorization form on file. It is the Lessees Responsibility to pick up and return equipment.

Req #:____ Vendor #:____



CONTACT INFORMATION							
Lessee Name		Tribal Department				Т	ribal ID Number
Street Address		City		State	itate Zip Code		
Work Phone	Cell Phone			Email			
PURPOSE OF REQUEST							
Event Name/Description			# of Guests #		# of Tables		# of Chairs
Date of Pick Up	Time of Pick Up	Date of Return		of Return	Time of		Return
RENTAL INFORMATION							

Equipment is picked up and returned at the **Gathering Hall** when event is over (Monday through Friday from 8:00am to 3:00pm) or the first business day after event date, no later than 3:00 pm, unless prearranged with CSR staff. NOTE: Approximate cost to replace tables is \$155.00 each and chairs \$31.00 each.

CREDIT CARD AUTHORIZATION

In the event of an unsatisfactory inspection, 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 renter. 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
	Please allow 48 hours to process
Date	Approver Signature

EQUIPMENT CHECK OUT/IN STAFF APPROVAL Date Time Staff Member Name (Print) Signature CHECK OUT AM AM Signature PM PM Staff Member Name (Print) Signature Date Time Staff Member Name (Print) Signature RETURNING Date Time Staff Member Name (Print) Signature PM PM PM Image: PM Signature

NOTE: There is a possibility of having to reschedule equipment rental in case of a community gathering, such as a funeral, which can occur at a moment's notice. Upper management will give as much advanced notice as possible for the lessee to reschedule.



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:

Print Name

Date:

Signature

TULALIP TRIBES 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