

Conference Room Reservation

Redwood Empire Schools' Insurance Group (RESIG) • 5760 Skylane Boulevard, Suite 100, Windsor CA 95492
Telephone (707) 836-0779 • FAX (707) 836-9079

1. User Category: **SCOE** **District** **Non-profit Agency** **Commercial**

2. Name of SCOE Dept., District, Agency, Group _____

3. Contact Person _____
Phone Number _____
E-mail Address _____
Mailing Address _____
On Site Contact (Required) _____

4. Meeting Title _____

5. Date of Use Requested _____

6. Time of Use Requested In _____ Out _____
Official Meeting Time Start _____ End _____

7. **User responsible** for room set-up (no charge)
 RESIG responsible for room set-up (\$30 fee per set up)
(Set-up fee includes tables and chairs only.)

8. Anticipated Number of People to Attend _____

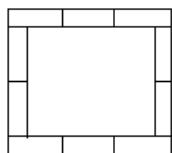
9. Room Layout (Maximum capacity for largest room is 65 people for Classroom Style)

Theater
of chairs
at head xxx xxx
table _____ xxx xxx
 xxx xxx

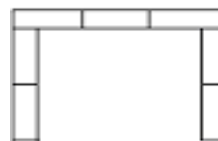
Classroom

of chairs
at head
table _____

Rectangle/Square



Horseshoe



Special Set Up
(Attach diagram)

10. RESIG equipment: (reservations required)

LCD Projector Laptop **PA System** **Flip Chart** w/ pens **Conference Phone**
 Overhead Projector/large room only. Keurig Coffee Coffee Machine/Pump Pots

11. Will the meeting be catered **Yes** **No**
If yes, anticipated time of arrival _____ Over → →

USER agrees to accept all responsibility for loss or damage to any person, property or entity, and to defend, indemnify, hold harmless and release RESIG, its officers, agents, and employees from and against any and all actions, claims, damages, liabilities or expenses that may be asserted by any person or entity, including USER, arising out of or in connection with the performance of the user hereunder.

We, the undersigned hereby certify that we shall be personally responsible, on behalf of our organization, for any damage sustained by the premises, furniture or equipment, because of the occupancy of said premises by our organization. **With the exception of RESIG's member districts, a Certificate of Insurance and Additional Insured Endorsement showing RESIG as a named additional insured shall be provided along with this application.**

- **The undersigned hereby acknowledges that they have read, understand and agree to comply and enforce all the requirements, policies, regulations and rules for the use of facilities and grounds of RESIG.**
- **A Certificate of Insurance naming Redwood Empire Schools' Insurance Group as an Additional Named Insured on the facility users' insurance policy with a liability limit of not less than \$1,000,000 is required. The Certificate of Insurance must be returned with the application or be provided no less than five days in advance of the event.**
- **No activity may be conducted in or on said facilities that is in violation of local, state or federal law.**
- **No smoking or use of tobacco or alcohol allowed in RESIG's facility.**
- **RESIG's facilities and grounds shall not be utilized by individuals, organizations, agencies or others that engage in discriminatory practices as prohibited by federal law, state law, or RESIG's policy.**

IMPORTANT NOTE: This form must be completed and returned to RESIG within 5 business days of initial booking. Reservations will be confirmed at that time.

Room cancellations must be made **1 month in advance** of the event to avoid room and set up fee charges. The following cancellation fee will be charged if notice is not given within 1 month:

San Andreas I/II - \$175.00 per day (non-members \$200.00)
Rodgers Creek - \$100.00 per day (non-members \$125.00)
Sonoma - \$75.00 for up to 4 hours or for 4+ hours \$100
Set up fees (\$30.00) will apply if applicable.

Authorized Signature of Agency

Telephone Number

Date

Billing Information: Name, Address, Telephone/other information needed for invoicing.