

Hopland Band of Pomo Indians

Request for Use of Tribal Areas — Tribal Member



Please Check ALL that applies

Is this a Community event?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Is your event <u>NON-Profit</u> ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Are you a Tribal employee?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If so, is the event work related?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Tribal Areas/Items Requesting

Community Hall	<input type="checkbox"/>	Nokomis Event Center	<input type="checkbox"/>	Park	<input type="checkbox"/>
Gymnasium	<input type="checkbox"/>	Tribal Equipment	<input type="checkbox"/>	Equipment	<input type="checkbox"/>

Tribal Areas/Items Requesting

Event Name				Event Date(s)	to
Organization				Event Type	
Contact Person				# Attending	
Address				Event Time	
City		Zip		In/Out Time	
Home Phone				Cell Phone	
Email					

COMMUNITY HALL

A security deposit of \$100 is required to book the facility and a fee of \$50 per day will be charged for room rental. *

NOKOMIS EVENT CENTER

A security deposit of \$200 is required to book the facility and a fee of \$50 per day will be charged for room rental. *

GYMNASIUM

Without use of tarp

A security deposit of \$350 is required to book the facility and a Use Fee of \$100 per day will be charged for rental of the gymnasium. *

Use with tarp

A security deposit of \$350 is required to book the facility and a Use Fee of \$250 per day will be charged for rental of the gymnasium. * A \$100 tarp fee.

EQUIPMENT

A security deposit of \$50 is required to use Tribal equipment. All equipment must be returned in proper working condition. *

*Security deposits will be returned after an acceptable inspection of facilities and Tribal equipment is completed.

Submit request at least 3 weeks BEFORE event

Deposit & Fee Requirements

Security Deposit:	\$ _____
Per Day Use Fee:	\$ _____
Other:	\$ _____
TOTAL	\$ _____

Signature of Responsible Party _____ Date _____
 The above named individual & affiliation will be responsible for ensuring proper use of the requested Tribal Areas and/or equipment. If any damages or improper use of the requested area or equipment items do occur, I (we) acknowledge that I (we) will be charged (value to be assessed)

Tribal Administrator	_____	Date	_____
Fiscal Department	_____	Date	_____
Amount received: \$	_____	Check /MO#	_____