

**Community Unit School District 300
Facility Rental Fee Estimate**

Community User Name: _____
Community User Group # _____ **Agreement #** _____

1. Facility Base Rental Fee:

Area _____	Rate _____	X hours/events _____	Fee \$ _____
Area _____	Rate _____	X hours/events _____	Fee \$ _____
Area _____	Rate _____	X hours/events _____	Fee \$ _____
Area _____	Rate _____	X hours/events _____	Fee \$ _____
Total Base			\$ _____

2. Additional Staff Required (Technology, Auditorium Lightning, Kitchen Staff):

Hourly Rate \$ 40.00 X hours used _____ Fee \$ _____

4. Custodial Services

Hourly Rate M-F \$ 27.00 X hours used _____ Fee \$ _____
Hourly Rate Sat. \$ 40.00 X hours used _____ Fee \$ _____
Hourly Rate Sun/Holiday \$ 54.00 X hours used _____ Fee \$ _____

5. Equipment

(Examples: chairs/tables/lectern/pianos/scoreboard)

A. _____ Fee \$ _____
B. _____ Fee \$ _____
C. _____ Fee \$ _____
D. _____ Fee \$ _____
Total Equip \$ _____

6. Additional Charges (Supervision, field/room preparation fee, clean up/garbage removal, snow removal)

_____ Fee \$ _____

7. Reciprocity/in-kind payment

Describe and provide monetary value of the reciprocity being proposed _____ Fee \$ _____

Total Rental Fee \$ _____

8. Billing and Payment Terms

