



Suburban Park & Recreation Association

Karaoke/PA/Sound System

Application & Agreement Form

Agency/Organization _____

Address _____

City _____

Zip _____

Contact Person _____

Phone _____

Email _____

Date Requested _____

Alternate Date Requested _____

Pick-up Date & Time _____

Return Date & Time _____

Rental Agreement

- Agency/Organization agrees to pay the appropriate rental fee listed below. Fee includes equipment only; operator is not included.

	<u>SPRA Member</u>	<u>Non-Member</u>
Weekdays: Monday-Thursday	\$50	\$100
Weekends: Friday-Sunday	\$75	\$150
*Holidays:	\$125	\$200 <small>(*Non-members may not book holidays more than 1 month in advance)</small>

(Holidays include but are not limited to: New Year's Eve, Christmas Eve, Labor Day Weekend, Memorial Day Weekend, July 4th, St. Patrick's Day or Valentine's Day. Weekend before/after may also be considered holiday. S.P.R.A. reserves the right to add holidays as deemed necessary.)

- Agency/Organization agrees to accept responsibility for theft or damage to machine incurred during the time of their rental.
- Agency/Organization agrees to provide qualified, responsible operator that has learned how to work the equipment properly and agrees to fully demonstrate machine upon transfer. Agency /Organization agrees to demonstrate equipment's working condition upon the return or transfer of equipment.
- Full payment or P.O. due on the day of pick-up. **Checks made payable to:** Suburban Park and Recreation Association.
- A waiting list will be held if your date is unavailable. Applications will not be accepted more than 9 months in advance.
- A \$100 refundable deposit issued on a separate check is due with application. This deposit is only refundable if cancellation is made a minimum of 10 working days prior to rental date and we are able to re-rent the same day. Waiting lists will be held.
- Mail completed, signed copy of this application to:

Scott McClaskey, Mt. Prospect Park District
411 S. Maple St., Mount Prospect IL 60056
Ph. (847) 632-9333 Fax (847) 632-9325 E-Mail: smcclaskey@mppd.org

As a representative of the aforementioned agency/organization, I fully agree to the terms of the Rental Agreement.

Authorized Agent: _____ Date: _____

Only upon transfer: Upon transfer of equipment, machine has demonstrated to be in excellent working condition.

Authorized Agent: _____ Date: _____