

## Holy Trinity School Facility Rental Application Form

### Applicant Information

| Field                        | Required Information                                                     |
|------------------------------|--------------------------------------------------------------------------|
| Organization/Group Name:     |                                                                          |
| Contact Person (Full Name):  |                                                                          |
| Mailing Address:             |                                                                          |
| City, Province, Postal Code: |                                                                          |
| Phone Number (Day):          |                                                                          |
| Phone Number (Evening/Cell): |                                                                          |
| Email Address:               |                                                                          |
| Type of Organization:        | (e.g., Non-Profit, Corporation, Private Individual, Sports League, etc.) |

### Event Details

| Field                                   | Required Information                                      |
|-----------------------------------------|-----------------------------------------------------------|
| Event Name/Purpose:                     |                                                           |
| Date(s) of Rental:                      | (Please specify if recurring)                             |
| Day(s) of the Week:                     |                                                           |
| Start Time:                             | (Including setup)                                         |
| End Time:                               | (Including cleanup)                                       |
| Total Estimated Participants/Attendees: |                                                           |
| Age Range of Participants:              |                                                           |
| Specific Space(s) Requested:            | (e.g., Gymnasium, Theatre, Classroom, Soccer Field, etc.) |

|                             |                                                                          |
|-----------------------------|--------------------------------------------------------------------------|
| If Gymnasium, specify size: | (Full-Size or Small)                                                     |
| Setup Requirements:         | (e.g., specific seating arrangement, tables, access to projector/screen) |
| Special Equipment Needs:    | (e.g., sports equipment, sound system, piano)                            |

### Insurance and Liability

I understand that Holy Trinity School requires all renters to provide proof of Comprehensive General Liability Insurance, in the amount of no less than Two Million Dollars (\$2,000,000), naming "Holy Trinity School" as an additional insured. This certificate must be provided no later than 14 days prior to the first rental date.

☐ I confirm that I will provide the required insurance certificate.

### Acknowledgement and Agreement

I, the undersigned, have read and understand the rental policies and terms and conditions of Holy Trinity School (HTS) and agree to abide by them. I understand that this application is subject to approval by HTS and that a 25% deposit is required at the time of confirmation to secure the space(s).

Applicant Signature: \_\_\_\_\_

Please contact Mary Bramley, Facilities Coordinator for any questions. She can be reached at [bramleym@hts.on.ca](mailto:bramleym@hts.on.ca)

Date: \_\_\_\_\_

**HTS Office Use Only**

| Field                      | Details        |
|----------------------------|----------------|
| Application Date Received: |                |
| Space Availability:        | ( ) Yes ( ) No |
| Insurance Received:        | ( ) Yes ( ) No |
| Rental Rate Quoted:        | \$             |
| Deposit Required (25%):    | \$             |
| Deposit Paid Date:         |                |
| Application Approved By:   |                |
| Confirmation Date:         |                |
| Notes:                     |                |