SANTA MONICA AIRPORT CONFERENCE ROOM RENTAL/ USE APPLICATION

Organization/Dept: ___________________________________ Contact: ______________________________

Address: ___________________________________ City: ________________________ Zip: _________________

Day Phone: __________________ Fax: __________________ Email: _________________________________

Date/s of Event/s: _________________________________ Day/s of Week: _____________________________

Set-Up Time: __________________ Event Start Time: __________________ End Time: __________________
(Include clean-up time)

Title of Event: ____________________________ Expected Attendance: ________________

Description of Activity: ______________________________________________________________________
________________________________________________________________________________________

Will a caterer be delivering food? Yes / No  If yes, name of caterer: ________________________________

SANTA MONICA AIRPORT CONFERENCE ROOM

Maximum occupancy is 20 persons.

Rates:  $35 per hour – including set-up and clean up or
$125 per half day (4 hours maximum)
$250 per full day (8 hours maximum)

User is responsible for clean up and for full repairs of any damages - $50 separate refundable deposit
required. Furniture must be restored to original arrangement

Hours available for rental: 7:30 AM – 10:00 PM non holiday Monday – Friday
8:00 AM – 5:00 PM holidays and weekends

Evening and weekend/holiday opening of doors/check-out and locking must be through Airport
Security. No keys will be provided.

No internet access is available.

No access to kitchen or any other airport offices or interior areas. Access is strictly from exterior
doors. Bathrooms are available along exterior walkway.

No amplified sound, no alcohol, no smoking, no parties, no commercial/retail operations. No storage
of material prior or after rental.

Room must be left in a clean and orderly condition. No food may be left in the room.
The City of Santa Monica does not permit the use of Styrofoam or other recycling symbol #6 materials
on site.

Checks should be made out the City of Santa Monica/Airport.

Date Received: __/__/__ Waiver & Release of Liability Signed: ___________ Payment: $_____________

Permit Granted by: ___________ Date: ___________ Room#: ___________ Permit#: ___________
Do not sign this agreement until after you read it and made sure there are no blank spaces.

Applicant _________________________ desires to use the __________________ facility located at________________________________ on ___________________. In consideration of being permitted to use the facility, the undersigned Applicant waives, releases, and discharges the City of Santa Monica, its officers, agents, servants and employees (collectively “CITY”) from all liability for any loss or damage whatsoever, including personal injury, death, property damage, medical expense and any other type of expense (collectively “damages”) whether caused by the active or passive negligence of the CITY, while the undersigned Applicant is in, upon or about the facility premises.

Applicant also acknowledges, agrees and represents that he/she has or immediately upon entering will, inspect the premises and facility. It is further agreed that entry and/or use of the facility constitutes an acknowledgment that the facility and all equipment thereon have been inspected and that the Applicant finds and accepts the facility and equipment as being safe and reasonably suited for use. Applicant accepts the facility in its present condition, and is without representation or warranty by CITY as to the condition of the facility, or as to the use or occupancy which may be made of it. Applicant also waives, releases and discharges CITY from all liability for any loss or damage, including personal injury, death, property damage, medical expense and any other type of expense caused by the condition and/or maintenance of the facility or any equipment.

Applicant also agrees to release, hold harmless, defend and indemnify CITY from any and all liability for any loss, injury and/or damages to any third party arising out of the use of the facility by the third party pursuant to this application.

The undersigned Applicant further expressly agrees that this waiver, release and indemnity agreement is intended to be as broad and inclusive as is permitted by the laws of the State of California and that if any portion of the Application and Agreement is held invalid, it is agreed that the balance shall continue in full legal force and effect.

Applicant certifies that he/she has read and voluntarily signs the release and waiver of liability and indemnity agreement, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

Applicant: _________________________________

Date: ________________