

**OAKS NORTH COMMUNITY CENTER, INC.  
 12578 OAKS NORTH DRIVE  
 SAN DIEGO, CALIFORNIA - 92128  
 (858) 487-0120 ♣ FAX (858) 487-5328**

**OAKS NORTH COMMUNITY CENTER AUDITORIUM USE FORM**

The Oaks North Community Center, Inc., hereby agrees to make the auditorium facility as described below available to the following provided the member, group or organization is in compliance with the Oaks North Community Center, Inc. Policies and Rules Governing Use of the Auditorium:

NAME: \_\_\_\_\_

IF ORGANIZATION - INDIVIDUAL IN CHARGE: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

DATE OF ACTIVITY: \_\_\_\_\_

TYPE OF ACTIVITY: \_\_\_\_\_

SET-UP TIME: \_\_\_\_\_ ACTUAL ACTIVITY START TIME: \_\_\_\_\_

ENDING TIME: \_\_\_\_\_ ESTIMATED ATTENDANCE: \_\_\_\_\_

INSURANCE (IF APPLICABLE): \_\_\_\_\_

NAME OF COMPANY

CHARGES:	\$ _____	PER SESSION
	\$ _____	ADDITIONAL FEE @ \$17.50 PER HALF HOUR FOR USE OF PREMISES AFTER 10:15 P.M.
	\$ _____	OTHER
		_____ KITCHEN* @ \$35.00
		_____ COFFEE POTS @ \$7.00 PER POT
		_____ TABLECLOTHS @ \$5.00 EACH
		_____ ICE @ \$.50 PER BAG
		_____ ICE CHESTS @ \$5.00 EACH
	\$ _____	<b>TOTAL CHARGES</b>

\*Kitchen includes kitchen facilities (stove, refrigerator, microwave, etc.), coffee pots, ice buckets, scoops,

punch bowls, pitchers and trays.

BY MY SIGNATURE BELOW, I SIGNIFY THAT I HAVE RECEIVED COPIES OF THE RULES AND POLICIES GOVERNING USE OF THE AUDITORIUM AND THAT I/WE AGREE TO ABIDE BY THE RULES AND POLICIES.

Dated: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINT NAME

ORGANIZATION NAME:

\_\_\_\_\_  
\_\_\_\_\_