



Northside Education Center
707 Farenthold
El Campo, TX 77437

T: (979) 543-6750
F: (979) 543-6727
Email: northside_center@yahoo.com
Website: www.northsidecenter.com

NORTHSIDE EDUCATION CENTER AGREEMENT FOR USE OF A MEETING SPACE

Application Date _____

Classroom Requested _____

Date Room is requested: Su Mo Tu We Th Fr Sa _____

Start Time of Event _____ End Time of Event _____

Beginning Time of Use _____ Ending Time of Use _____

(Please allow sufficient setup/cleanup time. You will be charged for these hours)

Expected Attendance

Description of Room Use in detail, including other requirements (e.g., A/V, set-up)

Name of Organization _____

Contact Person's Name _____

Address _____

City _____ ZIP _____

Daytime Phone _____ Evening Phone _____

Email _____ Fax _____

NEC Classroom Fee Schedule

Hourly Rate

Main Classroom, Board Room

\$30

Computer Laboratory

\$35

Non-profit discounts are available at 50% of commercial rates.
Recurring meetings and extended retreats may also earn discounts.
Additional services may be arranged by agreement, including audio-visual equipment, easels, kitchenette use, and room set-up.



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1. Is this group a non-profit organization? YES /NO If so, please give your federal tax ID number

2. Is there a fee for people to attend? Please detail YES /NO

3. Will refreshments be served or consumed? Please detail YES /NO

I affirm that I have read and will abide by the policies outlined in the "Policies for NEC Meeting Rooms," which rules are deemed a part of this Agreement. This Agreement is accompanied by proof of liability insurance and valid credit card guarantee for damage deposit.

Signature _____

Date _____

FEES – DUE WITH RESERVATION

Classroom being rented _____

Rent for classroom _____ hrs. x \$ 30 = \$ _____

Other fees _____ hrs. x \$ _____ = \$ _____
_____ hrs. x \$ _____ = \$ _____

TOTAL DUE = \$ _____

Check Enclosed Check no. _____

PROOF OF INSURANCE: Date received _____

DAMAGE DEPOSIT

This credit card guarantees that the classroom and/or equipment will be left in excellent condition.

Credit Card Number _____

Name on Card _____ Expiration Date _____