

Keystone Facilities Use Agreement Form

BASIC FACILITY USE FEE: \$200.00

(This fee waived to all member districts)

The Basic Facility Charge shall include: Room Use 6-Foot Tables Chairs Room Set Up / Clean Up Promethean Board Overhead Projector Screen TV/VCR Cordless Mic Flipchart/Markers Full Time In-House Keystone Support Staff On Site

*Morning Snacks/Drinks and **Afternoon Snacks/Drinks: \$6.50/person or \$7.50/person if requested drinks include a variety of sodas

*Morning Snacks to choose from: muffins, rolls, granola bars, fresh fruit, yogurt, bagels/cream cheese. Drinks include coffee, tea, lemonade, water-and sodas upon request.

**Afternoon Snacks to choose from: Cookies, Brownies, Fresh Popcorn, M&M's/Peanuts Mix, Chex Mix, Chips, Chocolate Bars. Afternoon Drinks are same as above.

Please select requested food choices:

Morning Snacks/DrinksYes_____ No _____ (Circle one: \$6.50/person or \$7.50/person)Afternoon Snacks/DrinksYes_____ No _____Catered LunchYes _____ No _____ \$12.50/personFull Day Food ServiceYes _____ No _____ \$15.00/person

Anticipated # of People attending ___

(Please send final count one week prior.)

Please mark items needed for your event:



| Promethean Board Technical Support | Yes Yes | No No | (\$40-50.00/day) KEYSTONE | |
|---|------------|-------------------|--|--|
| Cordless Mic System | Yes | No | LEARNING SERVICE | |
| Overhead Projector | Yes | No | | |
| IDL Equipment | Yes | No | (\$40.00/day) | |
| Projector | Yes | No | | |
| Screen | Yes | No | | |
| Flip Chart/Markers | Yes | No | Number Needed | |
| Chairs | Yes | No | Number Needed | |
| Photocopies | Yes | No | \$.04/copy or \$/05/copy for colored | |
| ~Please send one week p | | | | |
| Table/Room Set-Up: (Please Circle One) Classroom Style: x x x x | | <u>"U" Shape:</u> | $\begin{array}{c c} x \\ x $ | |
| Fishbone: x x x x x x x x x x x x x x x x x x x x x x x x x x x x x x x | | | | |

CANCELLATION

Notification of cancellation must be received by <u>14</u> days prior to the scheduled date of the **EVENT**. Notification of cancellation received after 14 days prior to the **EVENT** will result in being held liable for the entire Basic Facility Charge and any Special Service Charges.

Keystone Learning Services hereby agrees to provide use of the Lecompton Conference

| Center, 620 E. Woodson, Lecompton, KS to | | | | |
|--|--------------------------|--|--|--|
| on(date), from | to (time). | | | |
| Use/Event Description | | | | |
| Outside Event Representative: | Keystone Representative: | | | |
| Signature | Signature | | | |
| Date | Date | | | |
| User Information: User Name and Address | | | | |
| Phone | | | | |

Please fax to: Keystone Learning Services, 785.863.3143 Attn: Linda Kilgore