



CONFERENCE STUDIO
**APPLICATION FOR USE OF FACILITIES
 BY COMMUNITY GROUPS**

OFFICE USE ONLY

PERMIT NUMBER: _____
 PROCESSING FEE: _____
 INSURANCE: _____
 ALARM CODE: _____

NAME OF ORGANIZATION: _____

ADDRESS OF ORGANIZATION: _____

POSTAL CODE: _____ PHONE NUMBER: _____ E-MAIL: _____

PURPOSE OF RENTAL: _____

NAME /TITLE OF PERSON IN CHARGE OF THE PROGRAM: _____

ADDRESS (IF DIFFERENT FROM ORGANIZATION): _____

POSTAL CODE: _____ PHONE NUMBER: _____ E-MAIL: _____

ARE YOU A NON-PROFIT ORGANIZATION? YES NO REGISTRATION NUMBER (IF APPLICABLE): _____	OTHER THAN NON-PROFIT ORGANIZATION: (PLEASE SPECIFY) _____
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ARE THERE ANY CHARGES, INCLUDING REGISTRATION OR MEMBERSHIP COSTS, TO THE PARTICIPANTS? **YES NO**

IS THIS A FUND RAISING EVENT? **YES NO** IF YES, PLEASE SPECIFY THE CHARITY: _____

EQUIPMENT REQUIRED

PADDED CHAIRS (24 available) _____ No. required: _____	TABLES (6'x18") (12 available) _____ No. required: _____
FOLDING CHAIRS (26 available) _____ No. required: _____	TABLES (6'x24") (3 available) _____ No. required: _____
LCD PROJECTOR _____	MICROPHONE _____

FACILITIES REQUIRED

KITCHEN (Please check required kitchen equipment)

40 CUP PERCOLATOR (for coffee) _____	MICROWAVE _____
40 CUP PERCOLATOR (for hot water) _____	

DATE(S) REQUIRED: _____

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
ENTRY TIME							
EXIT TIME							
PROGRAM TIME	FROM: TO:	FROM: TO:	FROM: TO:	FROM: TO:	FROM: TO:	FROM: TO:	FROM: TO:

APPLICATIONS FOR USE OF CONFERENCE STUDIO FACILITIES MUST BE RECEIVED TEN(10) WORKING DAYS PRIOR TO DATE(S) OF USE

I accept responsibility for damage and/or injuries to any person(s), and for damage to the Harmony Chiropractic Conference Studio premises and/or equipment arising from use of Harmony Chiropractic property. I accept responsibility for all costs and fees incurred, and have read the Rules and Regulations on the reverse side of this form and I am committed to comply with the provisions.

Applicant's Name (Please Print)	Applicant's Signature	Date
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PERMIT RULES AND REGULATIONS

1. A non-refundable **processing fee of \$10** for community use of the Conference Studio is required for each permit processed. A maximum of four alterations may be made to the permit before another processing fee is charged.
2. The user shall be responsible for any sales taxes and services applicable for use of the Conference Studio.
3. Applicants are required to pay for any time that exceeds the information stated on the permit.
4. A 20% deposit is required booking the Conference Studio. The remainder of the rental fee is due five (5) business days before the date of usage.
5. The following forms of payment are acceptable: cash, cheque, Debit Card, MasterCard or Visa. Post-dated cheques will not be accepted.
6. Cancellation of facility permits must be made five(5) working days before the date(s) of use for the return of the 20% deposit. The notification must be in writing, including the signature of the applicant. Failure to do so will result in the loss of the deposit.
7. An applicant must be 18 years of age or older to obtain a permit.
8. The applicant must be present at the event with all pertinent rental information.
9. Priority booking is given to events scheduled by Harmony Chiropractic.
10. It is understood, and agreed, that organizations and individuals using the Conference Studio will assume full responsibility for the proper supervision of any activities they conduct on the premises and for any damage arising from the use of Conference Studio facilities and equipment.
11. Permit holders are **solely and fully** responsible for any claims arising out of their activities at the Harmony Chiropractic Conference Centre & Studio, and agree to indemnify and save harmless Harmony Chiropractic from all claims arising.
12. All permit holders must carry liability insurance of at least \$1 million, and name Harmony Chiropractic as an Additional Insured. An insurance certificate proving compliance with this requirement shall be provided before the permit application is approved.
13. In accordance with the *Smoke-Free Ontario Act*, smoking is Prohibited on all Harmony Chiropractic property & premises.
14. Alcohol is not permitted at any permitted event.
15. Games of chance, lotteries and raffles are permitted in the Conference Studio provided they meet all necessary laws, regulations and statutes. The event license must be provided within five (5) business days before the date(s) of use.
16. It is the responsibility of the applicant to examine the facility to ensure its suitability for the event.
16. Set up and take down of any equipment must be arranged at the time of the booking.
17. It is the responsibility of the applicant to ensure that the Conference Centre & Studio is left in the condition in which it is rented. This includes removal of all food, wiping of counter tops/microwave and bagging of garbage. Bagged garbage and recycling to be left in the kitchen for our clean-up.
18. To maintain the condition of the cork floor, outside shoes in winter or rainy weather need to be removed at the door and remain on the tile floor or on shoe mats provided.
19. Harmony Chiropractic reserves the right to cancel a permit at any time. Failure or refusal to adhere to permit regulations may result in cancellation of the permit. It is the responsibility of the permit holder to notify the participants that a change/cancellation has been made.
22. In the event of an emergency closure, Harmony Chiropractic is responsible for notifying the permit holder. It is the responsibility of the permit holder to notify the participants that a change/cancellation has been made.
23. Harmony Chiropractic accepts no responsibility for the loss or theft of any articles belonging to the permit holder or to persons attending the function/event.
24. Signs or decorations may not be attached to the walls or elsewhere without prior permit arrangement.

LEGISLATION & REGULATIONS GOVERNING ACTIVITIES AT HARMONY CHIROPRACTIC CONFERENCE STUDIO

CRITICAL INJURIES All critical injuries must be communicated to Harmony Chiropractic by calling 519-756 -1303. *A critical injury is a serious injury that places life in jeopardy; produces unconsciousness; results in substantial loss of blood; involves the fracture of a leg or arm; involves the amputation of a leg, arm, hand or foot; consists of burns to a major portion of the body, or causes loss of sight in an eye.*

OCCUPANT FIRE EMERGENCY PROCEDURES As the person in charge of a group using Harmony Chiropractic Conference Centre & Studio, you are responsible for ensuring that all participants in your program are made aware of the Emergency Exit in the centre. The applicant is responsible for the enforcement of all fire regulations and must ensure no obstruction of fire exits.

Maximum Occupancy: 50