

The Beacon – Facility Usage Policies

Mission

The Beacon is a shared community resource with a focus on offering facility space to groups who align with our mission: *Partnering together to bring transformation in everyday life.*

Cost

The Beacon is not a traditional rental hall and does not seek to gain a profit for facility use. We strive to charge very little (if any) to organizations who would like to use the facility. However, there is a cost to operate the building (insurance, utilities, alarm, grounds, etc). A utility fee will be estimated for each group based on usage, time and occupancy.

Request Procedure

Requests should be submitted at least two weeks in advance of the requested date. Requests will be reviewed by our board and the contact person will be notified of approval within one week of submission date. A signed copy will be returned to the applicant and one copy will be on file at The Beacon. Requests can be mailed to: The Beacon, 4210 Lincoln Way West South Bend, IN 46628

Liability

Currently, The Beacon is in Phase 2 of renovations to increase the amount of finished multi-purpose space. During this time, there is significant open space that can be used to ride bikes, play basketball, play foosball and billiards, as well as other activities. All of these activities, whether formally organized or informally occurring, occur 100% at the risk of the participant (and/or their guardian). While the property is maintained, it is an active job-site with demolition, construction and rehabilitation of facility, so the existence of sharp and/or blunt objects, power tools, and exposed concrete floor is a reality. The requesting organization is responsible for the supervision of all activities that may take place.

The requesting organization acknowledges that use of The Beacon facility described above involves risk to participants and may result in various types of injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage and financial damage.

The requesting organization accepts personal financial responsibility for any injury or other loss sustained during the activity or during transportation to and from the activity, as well as for any medical treatment rendered to the participants that is authorized by the requesting organization or its agents, employees, volunteers, or any other representatives.

Further, the requesting organization releases and promises to indemnify, defend, and hold harmless The Beacon Resource Center for any injury arising directly or indirectly out of the use of The Beacon or transportation to and from The Beacon, whether such injury arises out of the negligence of The Beacon, the requesting organization, the participant, or otherwise. If a dispute over this agreement or any claim for damages arises, the participant agrees to resolve the matter through a mutually acceptable alternative dispute resolution process. If the participant (or parent/guardian) and The Beacon cannot agree upon such a process, the dispute will be submitted to a three-member arbitration panel for resolution pursuant to the rules of the American Arbitration Association.

The Beacon – Facility Request Form

Applicant Information		
Organization Name:		
Contact Person:		
Street Address:		
City:	State:	ZIP Code:
Phone Number:	Email Address:	
Organization Mission:		
Is your organization incorporated? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If Yes, do you have non-profit 501(c)(3) status? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Does your organization carry liability insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If Yes, please attach a copy of statement of insurance to this request form.		
Request Information		
Description and Purpose of Activities:		
Check One: <input type="checkbox"/> One Time Event <input type="checkbox"/> Reoccurring Event		
Date(s):		
Time(s):		
Number of People:		
Space Requested: <input type="checkbox"/> Conference Room (Large table with seating for 10-15 people)		
<input type="checkbox"/> Multi-Purpose Room (Flexible Layout with seating for 50-60 people)		
<input type="checkbox"/> Open Space (Large unfinished area with concrete floor)		
Agreement & Signature		
<input type="checkbox"/> I have read, understand, and agree to The Beacon Facility Usage Policy		
Signature of applicant:	Date:	
Title of applicant (if requesting on behalf of an organization):		
To Be Completed by The Beacon		
Application Status: <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved		
Estimated Utility Fee (per day):		
Initials of Beacon Representative:		