

Early College High School at Delaware State University Fees Worksheet

Name of Organization _____

Date of Event _____ Number of People Attending _____

_____ Category I _____ Category II _____ Category III

_____ Proof of Insurance (Attach Rider)

Check All That Apply	Room	Capacity	Fee
	Entire Facility	(Capacities below)	\$300/hour
	Multi-Purpose Room	115	\$100/hour
	Atrium A	50	\$25/hour
	Atrium B	50	\$25/hour
	Atrium C	50	\$25/hour
	Entire Atrium	150	\$75/hour
	Room 1	30	\$25/hour
	Room 2	30	\$25/hour
	Room 3	30	\$25/hour
	Room 4	50	\$25/hour
	Room 5	60	\$25/hour
	Café B	30	\$25/hour
	Cafeteria	100	\$50/hour

Waived	Description/Fees	Total Cost
	Non-Refundable Application Fee	\$25.00
	Maintenance Fee _____ Hours @ \$15/Hour	\$
	Room Fee (From Above)	\$
	Set-up Fee: 0-25 chairs (\$25); 26-50 chairs (\$50); 51-100 chairs (\$100); 101+ (\$150)	\$
	Audio/Visual Services Smartboard/Portable Projector (s) # _____ x \$25 Portable Sound System \$25	\$
	Total Cost	\$

Signature _____ Date _____