

Title of Group or Organization:			
Name and Title of Group Leader:		Telephone:	
Address:	City:	State:	Zip Code:

Purpose of the rental:			Number of cabins:
Arrival Date:	Arrival Time:	Departure Date:	Departure Time:

Estimate number of attendees (Must be verified no later than seven days prior to the arrival date given above.):

Age range of attendees (if minors are involved):	Number of adult chaperones (one per every 15 attendees):
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Facilities to be used by group:
 Swimming Pool Auditorium Walking Trails Assembly Building Softball Fields Fishing Pond Football Fields

NOTE: If any member of the group has a disability requiring special accommodations, please attach a note to the application describing the requested accommodation.

COMPUTATION OF CHARGES		
Number of attendees: _____ @ _____ per day/per week/per meal = \$ _____		
Pre Registration Fee: \$ _____	Deposit Fee: \$ _____	
Rental of facilities (MEALS NOT PROVIDED): number of attendees _____ @ _____ = \$ _____		
ONE-DAY RENTAL: Rental of facilities (MEALS PROVIDED): cost per meal/person \$ _____ @ _____ = \$ _____		
Rental of Auditorium: cost per day \$ _____	Youth Function: \$ _____	Other: \$ _____

I, the undersigned, as the authorized representative of the applicant referenced above, agree to abide by the charges listed herein and to verify the number of attendees no later than 7 (seven) days prior to the arrival date, and assure that attendees under my supervision comply with Center regulations, a copy of which has been made available to me. I further understand that if the applicant desires to either cancel or postpone its use of the Center, the applicant must do so via written notification delivered to the Center's director at least _____ days prior to the arrival date referenced above or applicant will be responsible for, and agrees to pay, all amounts stated in this application and no such amounts paid will be credited toward any future use of the Center or any of its facilities by the applicant. Payment of the pre-registration fee and the remaining charges will be made by check, money order, or purchase order. The payment will be made payable to the Louisiana Department of Education within 30 days of the date of the invoice. In the event the applicant does not promptly pay any amounts owed, the Louisiana Department of Education may refer this matter to the Louisiana Attorney General for collection. If the Louisiana Department of Education does refer this matter to the Louisiana Attorney General, the applicant agrees to pay, in addition to the debt owed, the Louisiana Department of Education's reasonable attorney's fees, up to a maximum fee of thirty-three and one-third percent (33 1/3%) of the applicant's debt.

Applicant agrees to hold harmless, defend and indemnify the State of Louisiana, including but not limited to, the Louisiana Department of Education and its officers, directors, employees, subsidiaries, contractors, suppliers, agents, partners, affiliates, successors and assigns from and against all liabilities, claims, demands and expenses, including attorneys' fees that relate to or arise from applicant's use of the Center and/or any of its facilities.

Signature X	Title	Date
Deputy Superintendent, Office of Management and Finance Signature X		Date