Date: 2/5/2025

Contract Committee Review Request
MUST BE COMPLETED IN FULL

Action

Summary

Contract/Agreement Vendor:	Kenmark, Inc.			
contract, ig. content remain	Name of Vendor & Contact Pers	on		
	Vendor Email Address		RO	16827
	BAHS Musical props/se	ets for "Wizard of Oz"	V·Q	
	Describe Contract (Technology, pr	ogram, consultant-prof Developmen	t, etc.)	
	Please use Summary below to full	y explain the contract purchase , any title Education to review.	s, and details for the B	oard of
	BAHS Drama Reason/Audience to benefit	<u> </u>		
	03/10/2025 BOE Date	\$ 2,100.00 Amount of agreement		
Person Submitting Contract/A	greement for Review: <u>J</u>	eremy Stevens, Director o	of Theatre, BA	HS
PLEASE SEND THROUGH A				ARD CLERK
Principal <u>&/or</u> Director or Adr	ninistrator: Adam Forem	nan, Assoc. Dir. of Fine Ar	ts	
Does this Contract/Agreemen If yes, Technology Admin: no	t utilize technology? YE	S/NO		
-	<	3/		
Leadership Team Member: S	teve Dunn	ta Z. Duan		1
Funding Source. 11-155	11-155-100	00-810-100-4019-000-7	20	9
Funding Source: T1-155 Fund/Pro	المستحدث المستحدد	OCAS Coding		
		100 116 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		-/to for the
	il Agreement between Ba f "The Wizard of Oz", Ap	APS and Kenmark, Inc.fo	ir use of props	s/sets for the
Consent				

The Contract/Agreement should be received at least 2 weeks prior to a Board Meeting to ensure placement on the Agenda. The Contract Committee meets most Tuesdays at 8:00a.m. All Contracts/Agreements, regardless the amount, must be first approved by the Contract Committee and then presented to the Board of Education for approval and signature. The item will be placed on Electronic School Board for the board agenda by Janet Brown. By following this process, the liability of entering into an agreement is placed with the district rather than an individual.

This area must be asymplete with full explanation of contract



Kenmark, Inc. 8125 Santa Fe Drive Overland Park, KS 66204 Tel 913-648-8125 Fax 913-648-5218

QUOTATION

Ship Date

Quote Date

Account #

04/02/2025

1/22/2025

2594310

Bill To

Broken Arrow High School 1901 East Albany St. Broken Arrow, Oklahoma 74012 Jeremy Stevens Tel: 918-259-4310 Cell: sstevens@baschools.org Ship To

(Shipping fee includes round-trip)

Broken Arrow High School 1901 East Albany St. Broken Arrow, Oklahoma 74012 Jeremy Stevens 918-259-4310 sstevens@bascshools.org

5
50.00
0.00
00.00
25.00
5

Quote Valid for 30 Days

Discount

\$0.00

S&H

\$425.00

Total

\$2100.00

Print Name:

Signature

Date:



Rental Contract

NAME	Samuel	Stevens
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SHIP DATE April 7, 2025

ORGANIZATION Broken Arrow High School Theatre/Broken Arrow Public Schools

TERMS AND CONDITIONS:

- 1) NOT SIGNING THIS CONTRACT DOES NOT CANCEL THE ORDER.
- 2) CANCELLATION: If the order is cancelled you will be charged 50% of the total contract rental amount. THE ORDER MUST BE CANCELLED IN WRITING - NO EXCEPTIONS!
- 3) BACKDROP RETURN: Lessee is responsible for returning backdrops by the due dates. Lessee will be charged late fees at the rate of \$50 per day, per backdrop.
- 4) DAMAGE/LOSS: The Lessee assumes total responsibility for the backdrops rented and agrees to reimburse Kenmark, Inc. for any loss or damages incurred during the term of the rental. Lessee further agrees not to staple, tack, pin, or otherwise hang or attach drops in any manner other than with the tie lines provided. Tie lines should be intact and in the same condition as when received. Scrims are very delicate and must be handled with care. Damage costs for scrims starts at \$500. We do not recommend letting students hang or remove scrims. Any show package backdrops that are damaged will be charged total replacement value.
- 5) CHANGES TO ORDER: Written or verbal confirmation from Kenmark, Inc. plus a \$25 service charge will be required to change backdrops or dates on the order. Removal of any drops from an order within two weeks of the shipping date will be subject to 50% of the rental fee.

I have read and hereby agree to the terms and conditions of this contract as stated above:

Signature	Date							
PAYMENT OPTIONS:	(select one) OCHEC	⟨ oCR	EDIT CAR	D OF	o PURCHASE ORDER			
If paying by check the balance is due by the date stated on the invoice. If paying by credit card please fill out the information below. Anyone required to pay a security deposit may pay the deposit by either sending a separate check or by credit card. Security deposits are only processed if backdrops are late or if there is damage to the drop.								
CREDIT CARD TYPE: (select) OVI	SA O MASTER CARD	ODISCOVER	WHEN TO	CHARGE:	OTODAY	O DUE DATE		
CARD HOLDER NAME	SIGNATURE							
CARD NUMBER								
EXP DATE	CARD CODE							
CREDIT CARD BILLING ADDRESS					-			
USE THE ABOVE CARD INFORMATION FOR: (select one) O DEPOSIT O PAYMENT O BOTH								