

FACILITY USAGE AND FEES AGREEMENT FOR APPLE CREEK HISTORICAL SOCIETY BANQUET ROOM

Person/Organization _____ Person in Charge _____

Address _____ Phone Number _____

Event Date _____ Time Beginning _____ Ending _____

Purpose of Use _____

General Information: This is an air conditioned and heated facility that is handicapped accessible. No alcoholic beverages are permitted on the property and no smoking is permitted inside the building.

The banquet room is equipped with a warming kitchen which includes a stove, oven, microwave, refrigerator and freezer, dishwasher, sink and Bunn coffee maker. The room is accessible by elevator and two stairways. In addition to a small stage there is a large projection screen. A projector and a sound system are available for an additional hourly fee which includes the operator. There are 10 round tables and 120 chairs. The room capacity is 130 people.

No items are to be hung on the walls or ceiling except where provision has been made. No open flame candles or lights are permitted.

Rental fees plus security deposit are per day: Meetings 80 people or less: \$350. Meetings over 80 people: \$450. Sound system and/or projector with operator: \$40 per hour: NO _____. YES _____, Time needed _____

Security Deposit: \$200 due at registration. Full rental payment must be received by 10 days prior to event. In case of cancellation or no-show, the deposit will be considered a donation to Apple Creek Historical Society. No deposit will be carried over to a new date.

After the event and before leaving the room, it must be clean following the attached checklist which is part of this agreement. The security deposit will be refunded if all parts of this agreement are met.

Please vacate at the specified time, take your possessions leaving the room as you found it. Any damage or cleaning charges will be deducted from the security deposit with any additional damage billed to the Person in Charge listed on this agreement.

I have read, understand and agree to abide by the terms of this agreement.

Additionally, I agree to release, indemnify and hold harmless the Apple Creek Historical Society, its employees, officers, members, agents, and assigns from any and all claims, actions, causes of action, damages, expenses, judgments and awards arising directly or indirectly from, as a result of, or in connection with, the undersigned's use of its property and facilities and the scheduled event or activity and to pay all costs (including, without limitation, attorney fees) incurred by the Apple Creek Historical Society.

Person in Charge (print name) _____

Organization Name (if applicable) _____

Signature _____ Date _____

ACHS Representative: (print name) _____ Phone _____

Signature _____ Date _____