

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

Person/Organization: _____ Person in Charge: _____

Address: _____ Phone Number: _____

City / State / Zip: _____ Event Date: ____/____/____

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

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. There are 10 round tables and 120 chairs. The room capacity is 130 people.

Rental fees for dates beginning **01-01-2026** include the \$150 security deposit and are per day:
Up to 80 people \$350, Over 80 people \$450.

A projector and a sound system are available for an additional \$40/hour fee which includes the operator. No: _____ Yes: _____ Time needed: _____

Full rental payment must be received with the Rental Form. In case of cancellation / no-show the deposit will be considered a donation to Apple Creek Historical Society. No deposit will be carried over to a new date. Each rental must include a new form and full rental payment.

After the event and before leaving the room, it must be clean following the attached checklist which is part of the agreement. The \$150 security deposit will be refunded if all parts of this agreement are met. The room must be clean. Trash removed to the dumpster. All warming kitchen supplies put away. Warming kitchen cleaned. Nothing left in the refrigerator or freezer.

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 as listed on 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. The undersigned also agrees to pay all costs (including, without limitation, attorney fees) incurred by the Apple Creek Historical Society.

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

Mail with your payment to *Apple Creek Historical Society – PO Box 6 – Apple Creek, OH 44606*

Signature: _____ Date: _____.

ACHS Banquet Room Checklist

Kitchen:

- Sinks clean
- Refrigerator empty & clean
- Coffee maker clean & unplugged
- Dishwasher clean & empty
- Stove/oven clean & off
- Exhaust fan off
- Trash in dumpster
- Lights off
- Floor clean

Restrooms:

- Counters clean
- Toilets/urinals flushed

Main Room:

- Tables clean
- Chairs clean
- Stage clean
- Trash in dumpster
- Carpet swept
- Stage & room lights off