



Method of Payment

Picnic Shelter & Support House

Renter Name: _____ Date of Event: _____
Type of Function: _____ # of Attend: _____ Event Start/End Times: _____

All fees must be PAID IN FULL 30 days before event

No music is allowed past 6pm

** Rental includes 32 picnic tables, electrical outlets, restrooms, playground, and ample parking*

*Picnic Shelter (up to 8 hours) Rental Period (between 10am-8pm)		\$250.00	
*Picnic Shelter & Kitchen (up to 6 hours) Rental Period (between 10am-8pm)		\$400.00	
Decorating & Set Up	# of Hours x	\$100.00	
Post-Event Cleaning & Tear Down	# of Hours x	\$100.00	
Extra Hour (9am -8pm)	# of Hours x	\$100.00	
Long Banquet Table (8ft) MAXIMUM of 2	# of Tables x	\$15.00	
Sub Total			
* If Renter cancels the event, the deposit is not returned.			
Refundable Security Deposit			\$200.00
Non-refundable Cleaning Fee			\$150.00
Grand Total			

Make checks payable to: **OSDAA**

Renter agrees to compensate for all rental fees as defined by this payment sheet in accordance with the Ohio School for the Deaf Alumni Association to reserve the Community Center facilities.

Renter Phone No: _____ Email: _____

Printed Name

Signature

Date

Ohio School for the Deaf Alumni Association

Approval By/Printed Name

Signature

Date