

Method of Payment

Education Center/Theater

Approval By/Printed Name		Signature	Signature		Date	
Ohio Schoo	ol for the Deaf Alumni	Association				
Printed Name		Signature	Signature Date			
Renter	Phone No:	Ema	Email:			
_	Make checks pa ees to compensate for all io School for the Deaf Alu					
				Grand Total		
			Non-refundable	Cleaning Fee	\$150.00	
* If Renter cancels the event, the deposit is not returned. Refundable Security Deposit					\$750.00	
Class Room				Sub Total		
Commercial Gas Stove/Oven \$250.00 Glass Room \$150.00						
"Hotbox" Food Warming Equipment \$200.00						
<u> </u>						
Kitchen/Concession Window (if not renting the Exhibit Hall) \$300.00						
39" Tall Black Cabaret Tables (set of 6)		<u> </u>	# OI HOURS X	\$100.00		
Blue Padded Banquet Chairs Technical Staff Support			# of Chairs x	\$1.00 \$25.00		
Long Banquet Table (8ft)			# of Tables x	\$15.00		
Diameter Round Table (5ft)			# of Tables x	\$15.00		
Extra Hour (9	·		# of Hours x	\$175.00		
Post-Event C	leaning & Tear Down		# of Hours x	\$175.00		
Decorating 8	& Set Up		# of Hours x	\$175.00		
*Rental Peri	od (up to 4 hours) - (9am	n-12am)		\$750.00		
* Rental inclu	All fees mu Ides 225 seat auditorium, po		30 days before ever ern, 3 dressing rooms, c		ple parking.	
type of Fund	ction:					
Renter Nam	e:			Event:		

Effective Date: JANUARY 2024