



Client Venue Clean-Up / Check-Out Form

Venue Name: _____

Client/Organization: _____

Event Name: _____

Date of Event: _____ Time: _____ to _____

Venue Representative on Duty: _____

☒ Clean-Up Checklist

Please check each item as it is completed. The venue must be returned to its original condition.

Task	Completed (✓)
All personal belongings removed	<input type="checkbox"/>
All decorations, signage, and tape removed (if applicable)	<input type="checkbox"/>
Trash bagged and placed in designated area	<input type="checkbox"/>
Floors swept and/or mopped as necessary	<input type="checkbox"/>
Tables and chairs cleaned and returned to original position	<input type="checkbox"/>
TV and tech equipment powered off and returned (if applicable)	<input type="checkbox"/>
Restrooms checked and left in good condition	<input type="checkbox"/>
Kitchen/catering area cleaned (including appliances & counters)	<input type="checkbox"/>
All lights turned off	<input type="checkbox"/>
Doors and windows secured/locked	<input type="checkbox"/>

Notes / Damages / Items Left Behind

Please list anything out of the ordinary (e.g., damages, stains, broken items, maintenance needs, etc.):

Disclaimer & Additional Charges Policy

By signing this form, the client agrees to the following:

1. **Responsibility:** The client is responsible for all clean-up duties unless otherwise arranged in writing.
2. **Condition of Venue:** The venue must be returned to the same condition as it was received.
3. **Damages:** Any damage to the property, furniture, or equipment will result in repair or replacement charges at the client's expense.
4. **Abandoned Items:** Items left behind will be held for 48 hours. After this, they may be discarded or donated.
5. **Additional Charges:**
 - Incomplete clean-up: \$_____/hour of additional cleaning
 - Trash removal (if not properly disposed): \$_____
 - Damage repairs: Billed at actual cost + 15% administrative fee
 - Late check-out (if applicable): \$_____ per 15 minutes

Venue management reserves the right to deduct charges from the client's deposit if applicable.



✓ Client Confirmation

I confirm that the venue has been cleaned and left in acceptable condition as outlined above.

Client Name (Printed): _____

Signature: _____

Date: _____

Venue Representative Name (Printed): _____

Signature: _____

Date: _____

Thank you for your time!

Please return this checklist to a staff member or email it to: thefamilyvenue@outlook.com