THE JAMES SHAVER WOODSWORTH HOMESTEAD FOUNDATION 450 THE WEST MALL, ETOBICOKE, ONTARIO, M9C 1E9 TELEPHONE: 416-622-4124 FAX: 416-622-9403

E-mail: jswoods@bellnet.ca Website:



RENTAL FACILITIES AGREEMENT

Name:	Phone #:	Email:
Event Date:	Time:	# of Persons
FEES:		
	00 for full day Hourly \$30.00	/hr.
	0.00/hr 2 Hour minimum	
<u>Sundays</u> : 12pm-5pm \$30		
Saturdays Not available		
The above fees are charg	ged for the use of the main fl	oor and/or the basement.
It is understood and an	reed that the following con	nditions annly
_	e present to assist you during	
	er House closes at 5:00 pm	•
• •	•	ies and leaving them in the same
condition in which the		iee and leaving them in the earne
,	•	r enter the building to make
		eted, and everyone has left the
building.		•
	ty or event garbage from the	
		trash. Please <u>do not</u> place these
	as pick up will be refused.	
	d in the house. Smoking per	mitted outside only.
• Finger foods only		
	er of persons allowed on the	•
	ble for about 14 cars. Car po	ooling is recommended.
• • • • • • • • • • • • • • • • • • •	nitted on the premises.	
PAYMENTS Full payment is due at tim	o of booking	
LIABILITY	ie of booking.	
	name the facilities have b	een reserved shall be liable for a
damage and loss to a		oon received chair be hable for e
I have read and agree to	the terms and conditions set	out in this agreement
A I' (1. O' (the terms and conditions set	D. (.
11		
Payment received:	Receipt#	Date: