



THE ROYAL CANADIAN LEGION  
KINGSWAY BRANCH No. 175  
14339 – 50 Street, EDMONTON, AB T5A 0S9  
Phone: (780) 425-8654 Fax: (780) 425-0134  
E-mail: mgmt@kingswaylegion.com

Rev: May 2026

## Meeting Contract

Kingsway Branch #175 and \_\_\_\_\_  
Enter into this Catering & Banquet Facility Agreement on the terms and conditions set out below.  
Kingsway Legion agrees to provide the room(s), food, beverages, services and amenities  
described below and \_\_\_\_\_  
agrees to pay the amounts described below:

**Date of Agreement:** \_\_\_\_\_

**Date & Time of Event:** \_\_\_\_\_

**Number for Meeting:** \_\_\_\_\_

_____ Maple Leaf Ballroom	\$300.00 / 2-4 Hrs.
_____ (200 People)	\$650.00 / 4-8 Hrs.
_____ Wild Rose Ballroom	\$200.00 / 2-4 Hrs.
_____ (60 People)	\$425.00 / 4-8 Hrs.
_____ Board Room (20 People)	\$120.00 / 2-4 Hrs.
	\$250.00 / 4-8 Hrs.

**Type of Meal Service:**

- \_\_\_\_\_ Buffet - See menus for choices
- \_\_\_\_\_ **Price is Per Person**
- \_\_\_\_\_ Dinner – Buffet
- \_\_\_\_\_ Lunch – Soup & Sandwich or trays
- \_\_\_\_\_ Breakfast – Muffins, or fruit
- \_\_\_\_\_ Pop & Juice
- \_\_\_\_\_ Coffee & Water Only
- \_\_\_\_\_ Bartender - \$100.00

**Amenities:**

- \_\_\_\_\_ Podium / PA System– \$25.00
- \_\_\_\_\_ Projector /Screen \$100.00
- \_\_\_\_\_ Meeting with no food -  
\$10 fee for water jugs and glasses  
on tables
- \_\_\_\_\_ Room re-set charge \$275.00

**Payment:**

Payment required in full on the day of the event.

***MENU PRICES MAY CHANGE DUE TO RISING COSTS***

**Deposit:**

A ***NON-REFUNDABLE BOOKING/DAMAGE DEPOSIT*** equal to the **room rental amount + GST** is required at the time of booking.



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## MEETINGS

The rentee(s) and all persons participating with the rentee(s) during the rental period will identify and hold harmless the RCL175 rentor for all claims of personal loss and injury that is not the responsibility of the RCL175 rentor.

**THIS BOOKING/DAMAGE DEPOSIT IS NON-REFUNDABLE IF EVENT IS CANCELLED**

Please note that we require confirmation of the number of guests to be served at least **8 working days** in advance. If the above meets with your approval, sign this contract and return to the Manager.

Date of Event: \_\_\_\_\_ Time: \_\_\_\_\_ Room: \_\_\_\_\_

<i>Rentee(s)</i>	<i>Contact #1</i>	<i>Contact #2</i>
Name of Group		
Contact Name		
Address		
City, Province		
Postal Code		
Home Phone		
Work Phone		
Cell Phone		
Email		
<i>Signatures</i>		

\_\_\_\_\_  
Florence Werner  
Manager  
Kingsway Legion Branch No. 175  
(Rentor)

\_\_\_\_\_  
Date signed