



TSCHIRHART HALL RENTAL AGREEMENT

Responsible Party _____

Status: _____ Post Life Member _____ Post Annual Member _____ VFW Member _____ Veteran
_____ Non-Member _____ For Profit Organization _____ Non-Profit Organization

Address: _____ City: _____ State: _____

Phone: _____ E-Mail: _____

EVENT INFORMATION:

Date of Event: _____ Purpose: _____

Number of Attendees: _____ Will there be an Event Attendance Fee? Yes or No (circle)

Will professional catering services or use of the hall kitchen be needed? Yes _____ No _____ (Initials) If Yes, please contact our Food Service Officer, Kris Vandenberg, email kris@vettedkitchens.com.

Will Alcohol be allowed or served? Yes _____ or No _____ (Initials) If Yes, then a Special Event Insurance Policy listing VFW Post 4443 as additionally insured must be provided to the post property manager at least two (2) weeks prior to the event otherwise the event will be cancelled and a fee assessed, see below.

In the event of an emergency, a cell phone must be available to call 911. Phone _____ Initials _____

This agreement is between the Responsible Party identified above and VFW Post 4443. All rental fees, cleaning deposits and other expenses are the responsibility of the Responsible Party.

Fifty percent of the agreed on rental fee is due at the time of the reservation and the remainder is to be paid two (2) weeks prior to the event. Should the event be cancelled within two (2) weeks of the event there will be a cancellation fee assessed equal to one-half the rental fee or \$200 whichever is less.

A \$500 cleaning/security deposit is due at the time of the reservation. A Pre-Event checklist will be completed by the Responsible Party and the Post's representative prior to the event. All items/cleaning requirements identified on this checklist must be accounted for during the after-event inspection conducted by the Post's representative. The post quartermaster will DEPOSIT the cleaning/security deposit. Upon satisfactory completion of the after-event inspection, the cleaning/security deposit will be returned within fifteen business days. The cost of extra cleaning, any damages assessed, missing items or cancellation fee will be deducted from this deposit.

FEES:

Date/Begin time of Setup: _____ Date/End time of Cleanup/Inspection: _____

Total Hours: _____ X Hourly Rate: \$ _____ = Rental Fee: \$ _____ - 50% Paid: \$ _____ = Amount Due: \$ _____

VFW Representative/date: _____ / _____

Responsible Party Signature/date: _____ / _____ Cleaning/Damage Deposit Paid: \$ _____