**VFW Post 6824**

**1468 Haighs Pond Road**

**Rome, PA 18837**

**Hall Rental Agreement**

**Date of Event\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Time of Event\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Group\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Estimated number of attendees\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Renter is responsible to ensure that no one under the age of 21 years old consumes alcohol.

All alcohol must be purchased from VFW Post 6824.

Renter must coordinate all alcoholic beverages request through bar manager NLT one week (prefer two weeks if possible) prior to event.

No alcohol will be brought onto or taken from VFW Post 6824 property.

\*\*Bartender available for event at a rate of $15.00 per hour\*\*

Refrigerator available if needed.

\*\*Kitchen usage will be coordinated with the Auxiliary\*\*

Set up for event can be done prior to event if hall is available.

To receive your Clean UP FEE back: Clean up must be done the day after event unless other arrangements have been made.

NO SMOKING inside the building during event.

All people must be off VFW property by 2 am.

**Everyone under the age of 18 must be off VFW property by 10 pm.**

**VFW Post 6824**

**1468 Haighs Pond Road**

**Rome, PA 18837**

**Hall Rental Agreement**

**Date of Event:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Time of Event\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Member Rental Fee $175.00

Non-Member Rental Fee $200.00

The above fee includes a $25.00 reservation fee (nonrefundable) to be paid on the day you reserve the hall and a $50.00 Clean Up fee that could be refunded after inspection of hall.

Date Submitted \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Funds received with this agreement\_$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Balance due day before event\_$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total paid $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name of Renter Signature of Renter

Phone Number of Renter:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of VFW Representative:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_