

BELMOND AREA ARTS COUNCIL
RENTAL AGREEMENT

DATE OF ACTIVITY _____

DATE OF APPLICATION _____

NUMBER OF ATTENDING _____

AGE RANGE _____

STARTING TIME _____

ENDING TIME _____

CONTACT PERSON _____

NAME OF GROUP _____

PHONE (HOME) _____

(WORK) _____

ADDRESS _____

The undersigned hereby makes application to use please select either BARN OR ARTS CENTER for the above-listed date and time, and hereby makes payment of a rental fee of \$75.00 and a damage and cleanup deposit of \$75.00. Two checks are required; the \$75.00 rental fee will be deposited into the Belmond Area Arts Council Account and the damage deposit check will be held, to be returned when the facility is determined clean and undamaged.

If you need to cancel your reservation for any reason, you must do so 60 days before your reservation date or you may forfeit your rental fee.

The following rules and regulations also apply to the use of the facilities:

There is absolutely NO SMOKING in any of the buildings.

Fireworks shall NOT be permitted on the premises at any time without proper permit and written permission.

Beer and Wine are allowed. There is absolutely NO SALES of alcoholic beverages allowed. If you are having keg beer at the barn, the damage deposit increase to \$100.00 for the first keg and \$50.00 for each additional keg.

All litter, garbage and debris must be cleaned up and removed from the premises. The Art Center should be vacuumed: and the barn swept.

Failure to comply with any or all of these conditions will result in forfeiture of the deposit amount. The undersigned also agrees to be responsible for any damage over and above the deposit amount.

Please return both copies of this agreement with the proper payment within 10 days of receipt. One copy will be returned to you to verify rental.

_____, Authorized Group Representative. If you have any questions, please contact Sue Nelson at 641-444-4635. Please mail application to Sue Nelson 1141 Page Ave. Belmond, IA 50421.

For Arts Council use

Date Application Received _____ Approved by _____

Rental Check # _____ Deposit Check # _____

INSPECTION REPORT:

Date of Inspection _____ Inspected by _____

Clean YES NO Garbage Removed YES NO Damage YES NO

Comments _____

Deposit Returned YES NO IF Yes, Date Returned _____