

HCF FACILITIES USE AGREEMENT: WEDDING

Bride's Name _____

Address _____

Phone _____

Groom's Name _____

Address _____

Phone _____

Main Contact's Name (If not bride or groom)

Relationship to bride and/or groom

Address _____

Phone _____

Ceremony Date Requested: _____

Time Building will need to be unlocked:

Rehearsal Date Requested: _____

Time Building will need to be unlocked:

(over)

PLEASE NOTE:

It is understood that the following applicable fees* will be deducted from the deposit and a refund check will be issued only after all areas are appropriately cleaned and restored.

Unless the option for "Custodial Clean-up" is selected below - - - It is also understood that after the ceremony the wedding party will be held responsible for the cleaning of ALL areas used for the ceremony - including dressing areas.

Facilities Use Fee:

NO CHARGE

Required Personnel Fees:

WEDDING COORDINATOR FEE*	\$50*	
CUSTODIAN FEE*	\$50*	(Additional \$10.00* for each hour over 5)
SOUND TECHNICIAN FEE*	\$50*	(Additional \$10.00* for each hour over 5)
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	\$150.00	

Optional Fees: (Check those requested)

<input type="checkbox"/> STAGE CLEARED & RESET	\$50*
<input type="checkbox"/> CHAIRS MOVED & RESET	\$50*
<input type="checkbox"/> MULTI-MEDIA TECHNICIAN	\$50* (Additional \$10.00* for each hour over 5)
<input type="checkbox"/> CUSTODIAL CLEAN-UP	Varies (\$10.00 per hour)

_____ Date: _____
Responsible Individual's Signature



Required Deposit Amount - \$400.00

CIRCLE ONE: CASH (receipt needed) or CHECK

Received by: _____ Date: _____
Signature of Office Personnel