

AMERICAN LEGION POST 554 CONTRACT

LESSEE: _____ DATE: _____

HOME PHONE: _____ CELL PHONE: _____

DRIVER'S LIC #: _____ MEMBER #: _____
(COPY NEEDED) (COPY NEEDED)

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ E-MAIL: _____

TYPE OF EVENT: _____ DATE OF EVENT: _____

START TIME: _____ END TIME: _____ BAR TIME: _____

ESTIMATED NO. OF GUESTS: _____ CATERED? YES or NO (CIRCLE ONE)

HALL RENTAL FEE: \$ _____ INITIAL PAYMENT: \$ _____ DATE: _____

DEPOSIT AMOUNT: \$ _____ BALANCE DUE: \$ _____

TOTAL AMOUNT DUE: \$ _____ DATE DUE BY _____ COLLECTED BY: _____

WILL THERE BE ENTERTAINMENT? YES or NO (CIRCLE ONE)

BACK BAR? YES or NO (CIRCLE ONE) BAR TENDER? **\$15.00 PER HOUR**

15% GRATUITY ON SALES PAID: _____

BAR OPEN TIME: _____ BAR **SET UP FEE: \$30.00** PAID: _____

TWO (2) POLICE OFFICERS NEED TO BE PRESENT

THE UNDERSIGNED HAS READ THE RULES AND HAS BEEN GIVEN A COPY. THE AMERICAN LEGION IS NOT RESPONSIBLE FOR ANY INJURIES THAT MAY OCCUR.

HALL RENTAL MUST BE PAID IN FULL, SEVEN (7) DAYS PRIOR TO THE EVENT. IF YOU CANCEL THE HALL RENTAL, THERE IS A PRO-RATED CANCELLATION FEE (REF HALL RULES, PARA 1)

PRINTED NAME OF LEESEE

SIGNATURE OF LEESEE

AMERICAN LEGION MEMBER/HALL CHAIR

DATE

THIS FORM MUST BE COMPLETED AND RETURNED WITH THE FULL RENTAL FEE AND ALL APPLICABLE DEPOSITS TO CONFIRM THE RESERVATION.

LIABILITY WAIVER

AMERICAN LEGION POST 554, INCLUDING ITS OFFICERS, DIRECTORS, SERVANTS, AGENTS AND/OR EMPLOYEES, HEREIN CALLED "MANAGEMENT", AND THE OWNER AND/OR GUEST, INCLUDING PARENTS AND/OR LEGAL REPRESENTATIVES HEREIN CALLED "GUEST" AGREE THAT THE MANAGEMENT WILL IN NO CASE BE RESPONSIBLE FOR ANY LOSS, DAMAGE OR INJURY TO THE PERSON(S) OR PROOPERTY OF PARTICIPANT OR GUEST, AGENTS, SERVANTS, FAMILY, OR EMPLOYEES, REGARDLESS OF HOW SUCH LOSS, DAMAGE OR INJURIES OCCASIONED AND BY WHOM.

MANAGEMENT AND GUEST FURTHER AGREE THAT EACH PARTICIPANT WILL PROTECT, INDEMNIFY AND SAVE HARMLESS MANAGEMENT FROM ANY AND ALL CLAIMS, SUITES AND/OR JUDGEMENTS BROUGHT ON BY ANYONE AS A RESULT OF ANY LOSS, DAMAGE, OR INJURY TO ANY PERSON SOLELY IN CONJUNCTION WITH MANAGEMENT OR ANYONE ELSE.

SIGNED BY: _____

PRINTED NAME: _____

DATE: _____