Rental Contract
Terry L. Coleman Conference Center

Contract Date:___________________ Event Date:________________________

Name:____________________________________ Organization:________________________

Address:__________________________________ City, State, Zip Code:__________________

Phone:___________________________________ Mobile:_____________________________

Fax:_____________________________________ Email:______________________________

Type of Event/Purpose:____

Set-up Time:________ Event begins:________________ Event ends:___________________

Special requests/needs:____

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Total Deposit: $150.00 (refundable) Date Paid________________________
Total Rental:_$500.00____________ Date Paid________________________
Security Officers_______________ Date Paid________________________
Other charges:_________________ Date Paid________________________ Amount___________

Contract Total: $ __650.00________

Leasing Party Signature:____ Date:_____________

Approved by:____ Date:_____________

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By signing below, I acknowledge that I have toured the facility and am prepared to be responsible for the facility during set-up and my event. I have read and agree to abide by all the rules, regulations, and terms of rental as stated. **I understand I cannot leave the facility unattended at any time until I have been checked out by the Facility Supervisor, or I will forfeit my deposit.**

Leasing party:__________________________ Date:_________________________

Deposit refunded:_______________________ Approved by:__________________

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By signing below, the Lessee and Facility Supervisor have toured the facility, and the Facility Supervisor deems to be in the same or better condition than the Lessee found it. Check out time:_____________(initial)

Leasing Party Signature:____ Date:_____________

Facility Supervisor____ Date:_____________