

BRIAN KING CENTRE

Town Of Warman
Box 340
Warman, Saskatchewan S0K 4S0
email: brian king centre@sasktel.net
Telephone: (306)933-3040
Fax: (306)931-0819

THIS AGREEMENT TO RENT BETWEEN:

THE TOWN OF WARMAN

AND

NAME: _____

ADDRESS: _____ POSTAL CODE: _____

PHONE: _____ (HM) _____ (WK) _____ (CELL)

EMAIL _____

DATE(S)
REQUESTED: _____

TYPE OF
FUNCTION: _____

NO SMOKING ALLOWED:

The Brian King Centre has been designated as a non-smoking facility, Bylaw No. 89-9.

BOOKING DEPOSIT:

The date requested will be confirmed and the above named parties will comply with the terms of this agreement when the Town of Warman receives and receipts a deposit for \$ 150.00. This deposit will be used to guarantee the date as well as a damage deposit to cover the costs of repairing any damages to the BRIAN KING CENTRE, EQUIPMENT, CONTENTS AND GROUNDS resulting from carelessness or neglect on the part of you or your group. The Renter will be responsible for costs which exceed the Damage Deposit amount. The deposit will be returned (provided there are no damages) following the function.

PAYMENT:

The Town of Warman must receive payment in full for the rental, 30 days prior to the function date.

CANCELLATION:

The entire deposit will be forfeited if the booking is cancelled within 6 months of the confirmed day of the function.

The Town of Warman must be notified in writing of any cancellations.

RENTAL RATES/HOURS:

The Town of Warman will establish rental rates and times for all functions. The full day rental rate is in effect until 1:00 a.m. allowing 1 hour for cleanup after the close of the function. There will be a surcharge of \$100.00 per hour or portion thereof if the renter does not vacate the premises by 2:00 a.m. No extension of this time will be permitted.

RENTER RESPONSIBILITIES:

- The renter is responsible for removing all food, liquor, bottles, decorations, and personal effects and clean up of all kitchen/bar countertops, sinks, stoves/ovens, cups, dishes, utensils, coffee urns, mopping up major spills, cleaning up any vomit, and wiping off all tables used.
- **No confetti, sparkle glitter or helium balloons** will be allowed in the hall or on the grounds, renter will forfeit damage deposit if this policy is not adhered to.
- **No Straw/Hay Bales** will be allowed in the hall, renter will forfeit damage deposit if this policy is not adhered to.
- No decorations on the drapes, portable walls or dry-walled areas.
- No decorations from the ceiling.
- The piano must stay on the main floor.
- The Renter shall ensure that the appropriate Liquor permit has been issued for the function.

ADDITIONAL CHARGES:

- . \$50.00 charge for cleanup of major spills, vomit, broken glass, food on the floor.
- . \$50.00 charge if the ovens were used and not cleaned.
- . \$50.00 charge if sinks/drains/toilets are plugged due to neglect of the renter.

CARETAKER RESPONSIBILITIES:

. The Caretaker will ensure that the Brian King Centre will be clean, adequate paper supplies and garbage bags are on hand, set up all tables, chairs and related equipment, take down same and clean the hall after the function is over.

BRIAN KING CENTRE EQUIPMENT:

- . PUBLIC ADDRESS SYSTEM.
- . PIANO.
- . 50 - 48" ROUND TABLES.
- . 50 - 30" X 96" RECTANGULAR TABLES.
- . 600 CHAIRS.
- . 400 EACH OF (CUPS, PLATES, SAUCERS, SOUP BOWLS & CUTLERY).
- . OVENS & GRILL.
- . COFFEE URNS.
- . WALK-IN COOLER.
- . Ice Machine
- . BAR AREA.
- . **NOTE:** The above quantities may vary.

ITEMS NOT SUPPLIED:

- . LINENS, TABLE CLOTHS, TOWELS/DISH CLOTHS.
- . COOKING/SERVING DISHES AND UTENSILS.
- . CONDIMENTS FOR COFFEE, TEA OR BEVERAGES.
- . CATERERS, BARTENDERS, COAT CHECKS OR SECURITY PERSONNEL.

PLEASE COMPLETE THE FOLLOWING:

- . Main Hall _____, Meeting Rooms _____, Kitchen _____, Stage _____.
- . Number of people attending; function _____ for the meal _____.
- . Head Table and number _____, Cake Table _____, Register Table _____.
- . Food serving tables _____, Other _____, Cooler _____, Bar _____.
- . P. A. System _____, Piano _____.

DATE: _____ DOORS OPEN: _____ START: _____ FINISH: _____
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DATE: _____ DOORS OPEN: _____ START: _____ FINISH: _____

I _____ REPRESENTING _____ UNDERSTAND AND AGREE
print name group/organization

TO CONFORM TO THE ABOVE CONDITIONS OF THIS AGREEMENT. _____
signature

OFFICE USE ONLY:

DEPOSIT \$ _____ NO. _____ DATE _____

RENTAL \$ _____ NO. _____ DATE _____

FLOOR PLAN RECEIVED _____

D. D. REFUND \$ _____ CHQ # _____ DATE _____