



Village of Walton Hills Community Event Center
14660 Alexander Road • Walton Hills, OH 44146 • 440-786-2964

ROOM RENTAL CONTRACT

DATE OF EVENT: _____ TYPE OF EVENT: _____

SET-UP TIME: _____ EVENT START TIME: _____ EVENT END TIME: _____
(Must be out of the building by Midnight)

ESTIMATED ATTENDANCE: _____ ALCOHOL: YES NO SECURITY GUARD FEE \$ _____
(Police Officer must be in attendance when bar is open and must stay until End Time - Minimum 4 hours @ \$35/Hour)

RENTER'S NAME (Must be 21 yrs. or older): _____

ADDRESS: _____ Zip Code: _____

PRIMARY PHONE: _____ SECONDARY PHONE: _____

E-MAIL: _____ CITY ORGANIZATION: _____

COMMUNITY EVENT CENTER ROOM RENTAL FEES:

Banquet Room with Attached Kitchen: 3036 SF
Residents: \$750 / Non-Residents: \$850
Security Deposit (to book date): \$200 / \$50 Stove Fee
Residents ONLY: Chair Cover Rental Available
White Chair Cover: \$1.50 Each Chair Cover

Multi-Purpose Room + Small Kitchen: 1704 SF
Residents: \$100 / Non-Residents: \$300
Security Deposit (to book date): \$150
Residents ONLY: Chair Cover Rental Available
White Chair Cover: \$1.50 Each Chair Cover

The preceding information is correct to the best of my knowledge. I have received a copy of the Village of Walton Hills Rental Policies and agree to abide by all the regulations and policies set forth for the use of the building and/or grounds. I acknowledge overall supervision of and responsibility for this event. I acknowledge that the Village of Walton Hills has no responsibility, express or implied, for any damage or injury arising out of, or connected in any way with my/our use of the Community's facilities.

The Lessee agrees to exercise due care in the preservation of the premises and to prevent loitering and presence of unauthorized persons during all usage periods. The Lessee hereby agrees to remit the applicable rental fee and security deposit and be held responsible for any and all damage to persons, property and premises. Lessee shall indemnify and hold harmless the Lessor from any and all damage, loss, or liability of any kind whatsoever occasioned upon and/or with the leased premises, or ways or walks adjacent thereto, by reason of any injury to persons or property caused or alleged to be caused by any act or omission, neglect, or wrongdoing of the Lessee of any of his, her and/or its officers, agents, representatives, assigns, guests, employees, invitees, or other persons admitted by the Lessee to the premises. The Lessee will, at his, her and/or its own cost and expense, defend and protect the Lessor against any and all such claims or demands including attorney's fees.

SIGNED: _____ DATE: _____

TO BE COMPLETED BY VILLAGE OF WALTON HILLS PERSONNEL

Security Deposit Amount Due: \$ _____ Date Paid: _____ Receipt No.: _____

Rental Fee Amount Due: \$ _____ Date Paid: _____ Receipt No.: _____

Police Officer Amount Due: \$ _____ Date Paid: _____ Receipt No.: _____

TWO (2) WEEKS BEFORE EVENT:
Balance Amount Due: \$ _____ Date Paid: _____ Receipt No.: _____

AFTER EVENT:
OK to Return Deposit: _____ If NO, Reason Why: _____