

Braham Event Center Reservation Form & Rental Agreement- Wedding

This application must be filled out completely by an adult 21 years of age or older. All youth participating in a rental must have adult supervision at all times. All appropriate fees and deposits must accompany this form prior to the application being approved. A certificate of liability may be required.

Renter Information (please print clearly)

Name:	Partner:		
Street/House Address:	City:	State:	Zip:
Phone number at home:	Phone number at work:	Cell:	
Email address:			
	Event	Information	
Date of application:	Date of event:	Day of the	e week:
Purpose of event: Wedding Ceremo	ony: yes; no Wedding Reception: y	es; no	
Estimated attendance:	Will food be served? Yes/No will ald	cohol be served? Yes/N	o will there be youth in attendance? Yes/No
If yes, alcohol start time:am,	/pm; End time:am/pm You mu	ust use Braham Event C	enter Alcohol caterer!
Rental hours: Start Friday:a	m/pm; End:am/pm Start Satu	urday:am/pm; Er	nd:am/pm; Start Sunday:am/pm
	Rooms Reques	sted and rental fees:	
	Banquet Hall:; Multipu	rpose room:; Lib	rary:
	(See	backside)	

Record of fees

	Room rental: \$ (*do not	include damage deposit)		
	Food costs need to be negotiated w	ith Kathy's Kitchens.		
	Projector/Screen: \$50			
	Pipe and Drape: \$100			
	Set-Up fee \$25 per hour time's numb	per of hours: (if not du	ing regular rental hours)	
	Total fees from this section: \$			
		Due upon signing agreement	(room rental one half down p	ayment)
	*Damage Deposit: \$			
	Amount received: \$			
	Form of Payment: cash; check	; check number; c	redit card	
	Received by:	Date:		
		Final _I	payment deposit record	
	Due within 30 days of event: \$	Date final payment is o	ue:	
	Balance of rental: \$			
	Form of payment: cash:; chec	ck; check number	credit card	
	Received by:	Date:		
under the o	certificate of insurance. I, the undersigned a ity for the use of the facility. I hereby submit	oplicant have read the policies and r the requested damage/clean-up de	ules of the Braham Event Center and posit (in addition to the rental fee) for	rrence naming Tusen Tack as additional insured for General Liability, agree to fully comply with these rules and policies and accept full r my intended use in accordance with the rules and policies of the understand that if I cancel, the rental fee deposit is not returned.
Signature:	: Da	ate: Authorize	d BEC Representative:	Date: