

Phelps Community Historical Society
 66 Main St.
 Phelps, NY 14532
 Tel. 315.548.4940 Email: histsoc@fltg.net

Board of Trustees:

Linda Burns, President
 Tom Cheney, Treasurer
 Carl Beechler, Trustee
 Bill Broomfield, Trustee
 John Britting, Trustee
 Marion Donnelly, Trustee
 Jim Ebel, Trustee

Barbara Gillespie, Trustee
 Diane Goodman, Trustee
 Bob Goodman, Trustee
 Pam Raes, Trustee
 Marcia Scherbyn, Trustee
 Shirley Westfall, Trustee
 Joy Wilkes, Trustee

**AGREEMENT FOR PRIVATE USE OF HOWE HOUSE MUSEUM
 OR COUNTRY LAWYER’S OFFICE**

Building(s) to be used: _____

Date Required: _____ Time: (Start) _____ (Stop) _____

BUILDING RENTAL

Rental Party: _____

Address: _____ City: _____ ZIP: _____

Number of Attendees: _____ Phone: _____

Email: _____

CONDITIONS FOR RENTAL USE OF PCHS MUSEUM BUILDINGS

1. The reservation fee and security deposit are required to be attached to the completed application in order to confirm the date reserved. Refund terms for cancellations are also listed #14.

- **Security Deposit** payable to the Phelps Community Historical Society is payable upon signing and submitting **AGREEMENT FOR PRIVATE USE FORM**.
- **Payment shall be in the form of cash or a check.** The Security Deposit, less the cost of any damages or overtime charges incurred, shall be refunded to the renting party by mail within 30 days after the close of the on-site activity.
- **Rental Fees for Meetings and Occasional Events:**

	<u>PCHS Member</u>	<u>Non-Member</u>	<u>Non-Profit Org.</u>
	\$ 25.00/hr	\$ 50.00/hr	\$ 25.00/hr
	\$150.00/day	\$300.00/day	\$150.00/day
Security Deposit:	\$ 50.00	\$ 50.00	\$ 50.00

2. Any clean-up necessary at the end of the function must be completed by the renting party before the museum closes and will be the responsibility of the person(s) who sign the contract. Costs for extraneous clean-up done by Museum Staff will be deducted from the security deposit.

- Trash must be removed by the applicant.
- Kitchen and other rooms must be returned to the order they were found.
- Floors must be cleaned following the event

3. PLEASE BE AWARE THAT THE PHELPS COMMUNITY HISTORICAL SOCIETY BUILDINGS REMAIN OPEN TO THE PUBLIC THROUGHOUT YOUR SCHEDULED EVENT (only if scheduled during regular museum hours).

4. NO FOOD OR BEVERAGES permitted in the 2nd floor of the Howe House.

5. NO SMOKING ALLOWED in any of the buildings. Smoking is permitted in the parking lots.

6. The rental party is responsible for any damage that occurs to museum property during the time of the scheduled function.

7. The museum accepts no responsibility for accidents or injuries to visitors. Rental Party shall be required to sign a "Liability Waiver/Indemnification Agreement" prior to the rental and/or use of PCHS property.

8. The rental party may provide chairs and a canopy for outdoor ceremonies with prior approval by the Museum Director or designee and at no cost to the PCHS. Card tables (6) and folding chairs (24) are available for use within this rental agreement.

9. DECORATIONS must be reviewed with Museum Director or designee -no nailing, masking tape, scotch tape or stapling is allowed on any of the walls - we have techniques for hangings garlands, pictures etc. using the rail system. All decorations must be thoroughly cleaned-up after the function.

10. The museum is closed on Sundays and Mondays. However, the museum buildings may be available for rental occasions with prior approval by the Museum Director or designee.

11. The Museum Director or designee must approve requests for special arrangements or provisions at least 24 hours prior to the renting party's activity.

12. POSSESSION AND CONSUMPTION OF ALCOHOLIC BEVERAGES IS PROHIBITED ON THE MUSEUM SITE, which includes the parking lots, grounds and inside the buildings.

13. NO PETS ALLOWED in the museum sites, this includes the parking lots, grounds and inside the buildings.

14. **CANCELLATION POLICY:** The original receipt must accompany any refund requests. In the event of cancellation, fee payment and the security deposit shall be refunded on the following basis:

- 90 Days Notice or More: Full Refund
- 30 - 89 Days Notice: Refund Payment of Fees Only.

Forfeiture of security deposit

- Less than 30 Days Notice: Forfeiture of all fees and security deposit

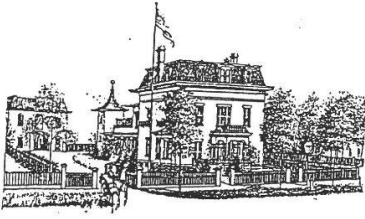
15. **MUSEUM STAFF OVERTIME FEES:** Any event extending past 4 PM or without the prior approval from the Museum Director will be subject to an additional fee of \$ 50.00 per hour to cover staff overtime. Events requiring an ending time past 4 PM may be available, but must be approved by the Museum Director and subject to staff overtime fees at time of reservation.

- **Museum Hours of Operation:** Summer Public Hours: Wednesday - Saturday from 10 AM to 4 PM and Winter Public Hours: Tuesday - Friday from 10 AM to 4 PM.

RENTING PARTY(S)

_____ Date: _____
Print Name Print Name

_____ Date: _____
Signature Signature



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CONTRACT FOR ON-LOCATION ACTIVITIES

The renting party agrees to permit the PCHS to document the activity for its own historic records.

This agreement is valid only when signed by the Director of the Phelps Community Historical Society, Board of Trustee Member, or an authorized Museum Staff designate and by the renting party(s).

Signed,

 Director or Designee, Phelps Community Historical Society

Date: _____

LIABILITY WAIVER/INDEMNIFICATION AGREEMENT

I have received, read, understood, and agree to comply with the Phelps Community Historical Society conditions for rental use of museum buildings including the fee schedule and cancellation policy.

I hereby fully release and discharge the Phelps Community Historical Society, its trustees, its officers, agents and employees from any and all claims from injuries, including death, damage or loss, which may arise or which may be alleged to have arisen out of, or in connection with the contracted event at the Phelps Community Historical Society.

I further agree to indemnify and hold harmless and defend the Phelps Community Historical Society, its trustees, its officers, agents and employees from any and all claims resulting from injuries, including death, damage or loss, including, but not limited to the general public, which may arise or may be alleged to have arisen out of, or in connection with the contracted event at the Phelps Community Historical Society.

Signature of Rental Representative _____ Date: _____

Renting Party(s) _____ Date: _____

Print Name _____

Signature _____

Date: _____

Print Name _____

Signature _____

MUSEUM STAFF ONLY

Security Deposit Received: \$ _____ Check No. _____ Date: _____

Fee Payment Received: \$ _____ Check No. _____ Date: _____

PCHS Receipt No. _____ Attached Copy: Yes No

PCHS Receipt No. _____ Attached Copy: Yes No

PCHS Receipt No. _____ Attached Copy: Yes No

Other Occasion Rental Date: _____ Time: _____

Date Recorded in Museum Calendar: _____

Follow-up Reminder Call Date: _____

Security Deposit Refunded Date: _____

Loss of Security Deposit Reason: _____
