

Pavek Museum Space Rental Agreement

I. Rules and Regulations:

Operating hours are Tuesday – Saturday 10am to 5pm, closed Holidays.

All organizations must reserve in advance and will receive confirmation prior to their event.

After-hours events must have a museum staff/docent on the premises at all times.

The exhibit collection can only be demonstrated by a museum staff member.

Groups are only to use the room(s) that they have rented in their contract.

All children 12 and under must be accompanied by an adult.

There is **no** alcohol, smoking, or guns allowed on museum property.

The museum reserves the right to refuse admission to the museum.

The museum is handicapped accessible.

NOTE: Groups wishing to rent out the entire museum for meetings (with or without a tour) will be quoted separately.

II. Deposit:

A signed contract along with a deposit of \$25 of your rental fee is required within several days of making your reservation. Deposit is non-refundable. The contract balance is due 2 weeks prior to your event. All additional fees incurred the day of the event are payable immediately.

III. Fees:

Rental Space	Provisions	Suggested Max. Capacity	Fee per hour (during operating hours)	Fee per hour (after operating hours)
Full Boardroom	Projector Screen Tables Chairs	60 seats (without tables) 40 seats (with tables)	\$80	\$100
Half Boardroom	Projector Screen Tables Chairs	25 seats (without tables) 15 seats (with tables)	\$45	\$55
Main Exhibit Space	Projectors Screens Chairs (Food not allowed in this room)	100 seats (without tables)	\$100	\$175

Optional Additional Services	1-20 Individuals	20 + Individuals
1. Food & Drink Set Up & Clean Up	\$20	\$30
2. Broadcast Workshop (Radio Show/Quiz Show)	\$140	\$220
3. Tour of Museum	\$120	\$200
4. Set up & use of overhead projector and/or polycom	\$15	\$20

PAVEK MUSEUM SPACE RENTAL AGREEMENT FORM

Date of Event: _____

Number of Attendees: _____

Name of Organization/User: _____

Non-profit 501(c)(3) # (optional): _____

Authorized Contact Person: _____

Address: _____

Phone: _____ Email: _____

Purpose of Event: _____

Time Event is to Begin: _____ Time Event is to End: _____

Time Set Up is to Begin: _____ Cleanup to be completed by (time): _____

Number of Operating Hours Present: _____

Number of After-Hours Present: _____

Total Number of Hours Present: _____

Please refer to the previous detailed information so that you may request the space and additional services needed, which most fit to your rental needs.

Space(s) being rented: _____

Additional Services needed: _____

Total (\$): _____

Signature: _____ **Date:** _____