

NICOLAYSEN ART MUSEUM & DISCOVERY CENTER

RENTAL AND USE OF FACILITIES CONTRACT

Name: _____ Today's Date: _____

Mailing Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Additional Contact Person: _____

Day and Date of Event: _____ Number of Guests: _____

Details of Event: _____

Are you a museum member? Yes _____ No _____

Total Rent Due: _____ Deposit Amount: _____ Balance Due: _____

Date Rental Deposit Paid: _____ Date Security Deposit Paid: _____

Rental Fees (based on 7 hours use)

- (a) Bryce Hall.....\$ 850
- (b) Patio.....\$ 50 per hour
OR with rental of Bryce Hall.....\$ 100 per event
- (c) Bryce Hall and the Galleries open for viewing.....\$ 1000
- (d) The Santilli Library/conference room.....\$ 50 per hour
OR used as a private dressing area.....\$ 100 per event
- (e) Bryce Hall and the Discovery Center.....\$ 1500
- (f) The entire Museum.....\$10,000
- (g) Bryce Hall for reception and Galleries for ceremony.....\$ 5000
- (h) Small Group (less than 50 people/3 hours).....\$ 400
- (i) Use of Steinway piano (qualified users only).....\$ 150

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Contacts:

Section must be completed 4 weeks prior to event

Alcohol and Beverage: _____

Caterer: _____

Event Coordinator: _____

Florist: _____

Linens: _____

Tables/Chairs: _____

Set up/Clean up: _____

I have read the agreements governing Facilities Use, Alcohol Policy, Catering, Music, Florist, Security Deposits, Clean Up, and Damage, and agree to abide by and be responsible for each during my event.

Further, I agree to the fees as stated above and agree that all monies must be paid in full to the NIC no later than _____, which is four (4) weeks prior to the event, or to submit in writing a cancellation notice by _____ (same date). I understand that if a written cancellation notice is not received by the agreed date, all monies paid to date will be forfeited.

Renter

Nicolaysen Art Museum & Discovery Center
Representative