



Rental Contract
Springfield Art Association and Edwards Place Historic Home
700 N. 4th Street
Springfield, IL 62702
217-523-2631

I/We, _____, acting on behalf of _____ have read the rental policies associated with the following locations and agree to rent (circle one)
Edwards Place The M.G. Nelson Family Gallery The Condell Studio
Edwards Place and the M.G. Nelson Family Gallery The Michael Victor II Library
owned by the Springfield Art Association, located at 700 N. 4th Street in Springfield, on _____ from the hours of _____ to _____ for the following function or event:

1. Agency/authorization (applicable to organizations)

The Lessee on behalf of _____ warrants that he/she is a duly authorized agent of _____ with authority to bind the principal.

2. Payment

The Lessee agrees to, with the execution of this agreement, pay a non-refundable deposit fee of \$100 to the Springfield Art Association and guarantees the remainder of the rental payment to be made no later than two weeks prior to the event. Deposit must be made by credit card; your number will be kept on file until one day after your event as security against any damage incurred.

The Lessee understands that an hourly charge of \$100.00 for every hour or portion thereof will be added to the final bill for events extending beyond four hours (one hour set-up, two hour event, one hour clean-up).

Rental fee total \$ _____

3. Adherence to Policies and Regulations for the Use of Edwards Place

The Lessee represents that he/she has read the attached Policies and Regulations for the rental of Edwards Place, attached hereto and made a part hereof, and agrees that they will be adhered to by the individuals using Edwards Place pursuant to this lease, and agrees to assume liability and responsibility for damages done to the building and/or its contents/grounds as a result of use, including any damage or misappropriation by any individual guests attending the function/event or employed by the Lessee to provide service for your lessee's function/event. The number of persons in attendance will be _____.

4. **Prohibition of the Sale of Alcoholic Beverages**

The Lessee warrants that no alcoholic beverages will be sold on the leased premises during the term of this lease and in the event that a personal injury or Dram Shop suit is filed against the Springfield Art Association as a result of any distribution of alcoholic beverages on the leased premises during the term of this Lease by Lessee or the agents, employees or guests of Lessee, that Lessee will hold the Springfield Art Association harmless from any liability including reasonable attorney's fees incurred in defense of any such action and indemnify the Springfield Art Association in the event it is called upon to satisfy such liability.

5. **Warranty Regarding Insurance Coverage**

The Springfield Art Association must be listed as an additional insured for both general liability and dram shop. Special event general liability coverage for \$1 million coverage including host liquor, if serving alcohol, is required. A copy of the certificate of insurance must be presented to the Springfield Art Association no later than two weeks prior to the event with the remainder of the rental payment.

6. **Cancellation**

Cancellation of the event of function by the Lessee should be made no less than (30) thirty days prior to the date of the event.

7. **Vendors**

The Lessee is responsible for providing all vendors with the Policies and Regulations for Rental. Vendors who have never worked with the Springfield Art Association may be contacted by a member of the Springfield Art Association Staff. If vendors have not been determined at the time of contract signing, Lessee will provide the Springfield Art Association with the names as they become available.

Name of Caterer _____ Phone _____

Name of Rental Company _____ Phone _____

Name of Beverage Caterer _____ Phone _____

Lessee Name _____ Signature _____

Address _____ City _____

State, Zip _____ Phone (H) _____ (C) _____

E-mail _____ Date _____

Please provide credit card information below, call the Springfield Art Association at 217-523-2631, or stop by the office at 700 N. Fourth St. Springfield, IL 62702 to make your reservation.
Credit card type:

Number:

Expiration:

Name on Card:

The sum of \$100.00 has been received as a deposit for the rental of Edwards Place on the above date for the purpose so stated in the contract.

Lessor _____

Title _____

Date _____