

Blacksburg Museum of History and Civic Center

101 N. Shelby St. Blacksburg, S.C. 29702 864-839-2332

Max Occupancy 141

Rental Agreement:

Name: _____

Organization: _____

Address: _____ Phone: _____

Email: _____ Driver's License: _____

Event: _____ Date: _____ Times: _____ - _____ (By 11:00 pm)

Number of guests: _____

Required Deposit and Rental Fees: (Payable by checks only to the Town of Blacksburg)

- A \$100.00 Non-refundable rental fee will be charged for daytime events (8am-5pm)
- A \$200.00 Non-refundable rental fee will be charged for evening events (5-11 pm)
- A \$250.00 Check for Deposit will be required at the time of signature. This check or a portion of monies may be returned to you, after the location is reviewed for cleaning/issues/damages by Town Administration.

Please review all Guidelines of the attached form regarding acceptable and unacceptable practices. Violations of the guidelines may require deposit funds or additional funds to repair facility.

I have read and understand the attached Guidelines regarding renting The Town of Blacksburg Museum & Civic Center. I understand I am responsible for this event during the stated date and time listed above. I understand payment of rental fees and deposit (2 checks) are due at the time of form completion. Rental agreement and fees must be submitted for approval 7 days prior to event date. If reason for cancellation occurs please contact the office at the number listed above ASAP.

Name: _____ Signature: _____ Date: _____

Town of Blacksburg Official use:

Administrator approved: _____ Date: _____

Staff member assisted renter: _____

Rental fee paid: _____ Deposit paid: _____ Deposit refunded: _____

Unlock and lock of Center, Review of Facility: _____

MIFI required: _____ Yes _____ No

Special notes regarding Center: _____

Required Work order: _____

Copy provided to Renter and original retained by Blacksburg Town Hall