

**CITY OF BEAMAN
P.O. BOX 125
BEAMAN, IA 50609**

RENTAL AGREEMENT FOR THE BEAMAN MEMORIAL HALL

RESPONSIBLE PARTY NAME _____

MAILING ADDRESS: _____

CITY _____ **STATE** _____ **ZIP CODE** _____

CELL PHONE _____ **WORK PHONE** _____

EMAIL _____

DATE OF EVENT _____ **TIME OF EVENT** _____

TYPE OF EVENT _____ **DATE/TIME OF SETUP** _____

Please check all that apply:

_____ This event **WILL have alcohol**. Fee: \$100.00; Deposit \$300.00
Please sign and return the **ALCOHOL RESPONSIBILITY STATEMENT** with your application.

_____ This event **will NOT have alcohol**. Fee: \$100.00; Deposit \$50.00

_____ I would like to set up the evening before my event if available. Fee: \$25.00

DEPOSIT:

Please include 2 checks made out to the City of Beaman, one for deposit amount and one for the fee. The deposit check will be mailed back to you following the event as long as the contract was adhered to and the key is returned to the Farmers Savings Bank, Beaman, IA.

Please note that your deposit will NOT be returned if any of the following rules of use are not followed, there is any damage incurred to the building during your event, or the event is cancelled without at least one week's prior notice. If any damage exceeds the deposit amount collected, the responsible party will be liable for the additional cost of repairs or replacement.

RULES OF USE:

- A. There shall be NO SMOKING in the Memorial Building
- B. The event must conclude by midnight (12:00 AM).
- C. Music **MUST** be held to a reasonable volume.
- D. Outside doors **MUST** be left shut.
- E. Chairs & Tables must be put back in the order in which they were found.
- F. All floors must be swept and cleaned.
- G. All garbage must be removed and put in the dumpster in the back of the Memorial Hall.
- H. The kitchen area must be cleaned and left as found. If you use dish clothes and towels, please leave them in the designated bucket for cleaning.
- I. **DO NOT** staple, tape, or hang anything from light fixtures, fans, quilts, or on any painted surfaces.

- J. ALL Lights including outside lights on the building must be turned off and all doors locked upon leaving.
- K. The key can be picked up during bank hours at Farmers Savings Bank, 218 Main Street, Beaman. After your event, you may leave the key at Farmers Savings Bank in the depository box located on the south of the building.
- L. Prior to your event, please return this agreement along with your deposit and payment to the City Hall drop box located at 227 N. Main Street, or by mailing it to City of Beaman, P.O. Box 125, Beaman, IA 50609

YOUR SIGNATURE SIGNIFIES YOU HAVE READ AND UNDERSTOOD THE ABOVE AGREEMENT. The City of BEAMAN is happy to have this building available for your use. Please use the facility responsibly so that others may enjoy this building, as you have, in future years.

PRINTED NAME

SIGNATURE

DATE

COLLECTED:

\$_____ **FEE** \$_____ **EARLY SET UP FEE** **CHECK #**_____

\$_____ **DEPOSIT** **CHECK #**_____

DATE PAID_____

BY_____

ALCOHOL RESPONSIBILITY STATEMENT

I, _____, UNDERSTAND AND AGREE TO THE FOLLOWING POLICIES REGARDING THE USE OF ALCOHOL AT THE BEAMAN MEMORIAL HALL. I FURTHER UNDERSTAND THAT IF THE POLICIES ARE NOT FOLLOWED IT MAY RESULT IN NEGATIVE CONSEQUENCES TO ME OR MEMBERS OF MY EVENT PARTY AND I RISK MY DEPOST BEING FORFIETED.

- A. The person whose name is on the rental agreement for the use of the Beaman Memorial Hall is responsible for ensuring this policy is followed for their event.
- B. There shall be NO ALCOHOL sold on the premises unless a license to do so has been obtained from the Iowa Department of Alcohol Beverages Division and approved by the Beaman City Council.
- C. There shall be NO ALCOHOL consumed outside the building during this event.
- D. There shall be NO ALCOHOL served to, or consumed by, anyone under the legal age of 21 years.
- E. Any persons appearing to be impaired or obviously intoxicated shall not be served alcohol.
- F. The event will be dedicated to the safe and responsible distribution of alcohol.
- G. You will not knowingly serve alcohol to an underage or obviously intoxicated person.

PRINTED NAME

SIGNATURE

DATE