



CITY OF CALLAWAY
 CALLAWAY ARTS & CONFERENCE CENTER
 500 CALLAWAY PKWY, CALLAWAY, FL 32404
 OFFICE: (850) 874-0035

Date(s) of Event: _____
 Organization Name: _____
 Contact Name: _____
 Telephone #: _____
 Address: _____

Callaway Arts & Conference Center Rental Fees

8AM to 12AM, pricing includes 6 consecutive hours. Additional hours may be purchased by the renter.

<u>Room Charges</u>	Returnable Deposit	Rental Fee		
Callaway Room	\$300.00	\$600.00		\$ _____
Additional Hrs (Callaway RM)		\$100.00	X _____	\$ _____
Florida Room	\$100.00	\$200.00		\$ _____
Additional Hrs (FL RM)		\$40.00	X _____	\$ _____
Callaway RM W/ Florida RM	\$300.00	\$750.00		\$ _____

Applicable Charges

Security Fee w/ Alcohol Consumption (min 4 hours)		\$55 per hr.	X _____	\$ _____
Cleaning Fee (min 2 hours)		\$40.00 Per hr.	X _____	\$ _____
Special Event Fee (In addition to facility rental)		\$125.00		\$ _____

Decor Rentals

Dance Floor		\$40.00		\$ _____
Projector Usage		\$40.00		\$ _____
Laptop Computer		\$40.00		\$ _____
Tablecloths		\$8.00 Each	X _____	\$ _____
Cloth Napkins		\$.50 Each	X _____	\$ _____
Skirts		\$8.00 Each	X _____	\$ _____
Chair Covers		\$2.00 Each	X _____	\$ _____
Chair Sash		\$.50 Each	X _____	\$ _____
Chafing Dishes		\$8.00 Each	X _____	\$ _____
Sterno Fuel Each (2 Per Chafer)		\$2.00 Each	X _____	\$ _____
Coffee Maker 30/40 Cup		\$10.00 Each	X _____	\$ _____
Beverage Dispenser		\$6.00 Each	X _____	\$ _____

Returnable Deposit Received:	Yes / No
Sub Total:	\$ _____
Sales Tax 6.5%	\$ _____
Grand Total:	\$ _____

I understand that I am responsible for cleaning and leaving the facilities in the same condition as prior to the rental. No sales of alcohol are permitted and no consumption of alcohol outside of the building. The client is responsible for complying with all Federal, State, and Local alcoholic beverage laws, if applicable.

Client's Signature: _____ Date: _____

Payment Received By: _____ Date: _____

*Cancellations must be made in writing more than 30 days in advance from the reserved date to receive a partial refund.
 An Administrative Fee will be automatically removed from the rental fee of \$50.00.
 Cancellations must be made in writing less than 30 days in advance from the reserved date will forfeit the Security Deposit.
 If cancelation occurs, the refund will take approximately 2-3 weeks to receive, via mail service.*



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TERMS AND CONDITIONS

1. The Arts and Conference Center doors will be opened to the user no earlier than 8:00 AM Monday-Sunday. A Leisure Service Department employee will call the week of the event to confirm the time for entrance and departure.
2. The event must end early enough to allow for the premises to be cleaned and all property belonging to the City of Callaway to be put back in its proper location.
3. The user shall not remove, alter, or destroy any property or fixtures associated with the facilities. **The user shall not cause holes or attach tape or ties to the walls or ceilings.**
4. Cleaning requirements include removing all trash, including restrooms, to be placed in the dumpster behind the facility, sweeping and mopping the kitchen and foyer when necessary, removing all food items, vacuuming the rooms, and removal of all personal belongings. We ask users to leave the facility as same as when they arrived.
5. The user shall not allow any unlawful conduct. No alcoholic beverages of any type are allowed in the building or on the premises unless otherwise agreed upon beforehand when making the reservation. No excessively loud music or any other noises are allowed.
6. The user shall indemnify and save harmless the City from any damage, injury, or loss resulting from the use of the facilities by the requestion person, group, association, or organization.
7. The individual/ organization who signs the damage agreement and statement of responsibility are responsible for the premises until checked out by a staff member.
8. The City is not responsible for any personal belonging left in the facility.
9. Following the use of the facility, a Leisure Services staff member will inspect the facility to verify that it is left cleaned and undamaged. If necessary, the Leisure Department will determine an amount to be deducted from the Security Deposit. A check request for the deposit will be submitted for the refund of the Deposit to the City's Finance Department. The refund will be mailed to the name and address on the rental agreement. If this occurs, the deposit will take approximately 10 to 21 days to receive, via mail service.
10. The damage deposit is not a liquidated amount for damages caused by the use of the facilities. The City shall retain the right to seek additional damages from the user should damage exceed the amount of the deposit.
11. The City holds the right to refuse or halt services to the client and/or their guests for illegal substances, Rowdy, disruptive, or immoral behavior that does not reflect the views of the City of Callaway.
12. The City of Callaway retains the right to enter the premises at any time during the use of the facilities.
13. Due to the facility falling within the boundaries of City Parks, in accordance with City Ordinance No. 1063, there is to be **no smoking or vaping** inside or outside the facility.

User Signature: _____ **Date:** _____

**CITY OF CALLAWAY FACILITIES USE
INDEMNIFICATION AND HOLD HARMLESS AGREEMENT**

The undersigned for good and valuable consideration the receipt and sufficiency of which is hereby acknowledged, agrees to the fullest extent permitted by law, to indemnify, defend, pay on behalf of, and hold harmless The City of Callaway (the "City"), its elected and appointed officials, its agents, employees, and volunteers and other working on behalf of the City from and against any and all claims, demands, suits, or loss, including any and all outlay and expense connected therewith, including reasonable attorney's fees, and for any damages which may be asserted, claimed or recovered against or from the City, its elected and appointed officials, employees, volunteers or others working on behalf of the City, by reason of personal injury, including bodily injury or death, and property damages, including loss of use thereof, which arises out of or is in any way connected or associated with the undersigned's use of the City's facilities for the dates of _____ to _____, including acts or omissions by the undersigned's members, agents, servants, officers, employees, representatives, independent contractors and their subcontractors, invitees, patrons, and suppliers. It is the intention of the parties that the City, its elected and appointed officials, agents, employees, volunteers, or others working on behalf of the City shall not be liable or in any way responsible for injury, damage, liability, loss, or expense resulting to the undersigned, its members, agents, servants, officers, employees, representatives, independent contractors, and their subcontractors, invitees, patrons, and suppliers due to accidents, mishaps, misconduct, negligence or injuries either in person or property of the City's facilities.

Agreed to this ___ day of _____, 20__.

Client

City Staff



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Date(s) of Event: _____
 Contact Name: _____
 Telephone #: _____
 Event Type: _____
 Arrival Time: _____ Event Start Time: _____ Departure: _____

Callaway Room Floor Plan

FLOOR PLAN TYPES (Check One):

Number of Guest: _____

- Banquet Style (Max 180)



Comments: _____

- Theater Style/ Ceremony (Max 200)



Comments: _____

- Classroom Style (Max 160)



Comments: _____

- Cocktail Style (Max 300)

Minimum to No

Tables/ Chairs

Comments: _____

- Other Style

Comments: _____

Florida Room Floor Plan

FLOOR PLAN TYPES (Check One):

Number of Guest: _____

- Banquet Style (Max 50)



Comments: _____

- Theater Style/ Ceremony (Max 50)



Comments: _____

- Classroom Style (Max 36)



Comments: _____

- Cocktail Style (Max 60)

Minimum to No

Tables/ Chairs

Comments: _____

- Other Style

Comments: _____

Jan 10 04 02:12p

Russell Construction

850-728-3278

