



Room Rental – Application for Use

Effective May 1, 2019

Special Accommodations: The Historical Museum will not discriminate against eligible residents for participation on the basis of a disabling condition. We invite any resident with a special need to contact our staff upon submitting an application.

NAME OF APPLICANT _____

HOME ADDRESS _____ **CITY/ST/ZIP** _____

EMAIL _____

CELL PHONE _____ **SECOND PHONE** _____

ORGANIZATION _____

ADDRESS _____

TYPE (athletic, service, recreational, etc.) _____

IS THIS A NOT-FOR-PROFIT ORGANIZATION? _____ YES _____ NO

EVENT INFORMATION

- ❖ The facility is available to rent from **9 AM – 9 PM**.
- ❖ Your fee begins when you *or* guests enter the facility and ends when you *or* guests leave the facility.

TYPE OF EVENT _____

NOTE: The above description of your event will appear on the outside “Welcome Sign” for your guests.

DATE _____

ARRIVAL FOR SET-UP _____ : _____ **AM | PM**

NOTE: This is the time that staff is instructed to unlock the room. Access to the room will not be available earlier than the stated arrival time.

*Your reservation fee begins at this time.

**Reservations will not be accepted before 9 AM.

➤ YOUR GUESTS’ EXPECTED ARRIVAL TIME: _____ : _____ AM | PM

DEPARTURE AFTER CLEAN-UP _____ : _____ **AM | PM**

NOTE: An additional **\$50** fee will be added to your invoice for **each 15 minutes** beyond the contracted time of reservation.

*Reservations will not be accepted beyond 9 PM.

ESTIMATED ATTENDANCE _____ # OF AHPD RESIDENTS _____

IS THERE AN ADMISSION CHARGE OR DONATION FOR THIS EVENT? _____ YES _____ NO

Arlington Heights Historical Museum Room Rental Terms and Conditions
Please carefully read the following conditions before signing this rental application agreement.

1. Museum buildings and grounds shall be left in a clean and orderly condition. All event supplies brought into the Museum are expected to be removed at time of departure.
2. Alcohol is not permitted on Museum property.
3. When temporary signs and/or other physical additions and/or changes are desired, prior approval must be obtained from Museum staff. All signs posted and/or other physical additions on the Museum property must be removed by the Group/Individual upon the conclusion of the rental.
4. Various rooms at the Museum must be maintained at a certain temperature due to preservation of the historical collections. Therefore, temperature control and opening of doors and windows will be monitored and maintained by Museum staff.
5. Light refreshments (i.e. cake, coffee, pizza, etc.) may be brought in. Limited kitchen facilities are available for use with prior permission (i.e. coffee urns, refrigerator, microwave, etc.).
6. Smoking inside the Museum and all other Village of Arlington Heights properties is prohibited.
7. No materials, objects or equipment belonging to the Museum may be touched or moved without approval and/or only under the supervision of authorized Museum staff.
8. Use of lighted candles is prohibited (exception made for small cake candles).
9. The Museum will not be responsible in the event that the meeting room becomes unavailable because of circumstances beyond its control. This includes but is not limited to: power failure, roof leaks, structural damage, lack of sanitary facilities, and/or closure of the facility by the Village of Arlington Heights or the Arlington Heights Park District. All fees will be returned in full in the case of such an occurrence.
10. The Arlington Heights Historical Museum does not assume any liability for property lost or stolen on the Museum premises or for personal injuries sustained on the premises during the Group/Individual use of the premises. The Group/Individual hereby agrees to assume the full risk of any injuries, damages or loss, regardless of severity, that the Group/Individual and their attendees/guests may sustain as a result of this agreement. The Group/Individual further agrees to waive and release the Arlington Heights Historical Museum: Arlington Heights Park District, Village of Arlington Heights, and the Arlington Heights Historical Society from any and all losses, claims, suits or judgments or damages that Group/Individual and their attendees/guests participants might sustain as a result of any and all activities connected with or associated with this agreement.
11. The Group/Individual renting a room at the Museum will be responsible for the conduct of their attendees/guests and any damage to the premises resulting from the acts of such attendees/guests. In the event of damage to the Museum's facility (carpet stains, broken equipment, broken furniture, and/or other damage) the Museum reserves the right to apply an additional fee to the application agreement to cover damage cost(s).
12. Payment will be made in full no less than one week prior to the scheduled event.
13. A fee of \$50 will be accrued for each 15 minute increment spent beyond contracted reservation time. This fee will be payable to the Arlington Heights Historical Museum.
14. **Reservations will not be accepted before 9 AM and after 9 PM.**

Other Conditions

If this box is checked, a certificate of insurance is required from your group naming the Arlington Heights Park District, the Village of Arlington Heights and the Arlington Heights Historical Society as additional insured. Please forward this certificate to the Museum Administrator two weeks prior to the date of the event.

By signing this application you are confirming you have read and understand these terms and conditions.

Signature of Applicant: _____

Date: ____/____/____

Will You/Your Group bring any supplies to your event? Such as, light refreshments, decorations, etc...

If Yes; Describe: _____

The Museum can provide these items as part of the rental, please check off those items needed:

____ **A/V Equipment** (additional \$25)

*See page 4 for a list of available equipment.

____ **Podium**

____ **Dry Erase / Chalkboard**

____ **Extension Cord**

____ **Coffee Urn 55 cup** ____ **Coffee Urn 30 cup** ____ **Refrigerator** ____ **Microwave**

Please attach an additional sheet of paper for setup details; or discuss with Room Rental Coordinator.

SIGNATURE OF APPLICANT

DATE

FOR OFFICE USE ONLY

Fee calculation

_____ Date approved
_____ Approved fee
_____ Permit sent
_____ Permit finalized

_____ Museum Administrator
_____ Supt of Recreation
_____ Director of Recreation
_____ Executive Director

Certificate of Insurance Required ____ Yes ____ No

Payment Made: _____ Amount _____ Date

Total Numbers of Attendees: _____ **Staff Initials:** _____

Available A/V Equipment for rent (\$25)

- LCD projector
- Smartboard
- Portable screen
- Speakers

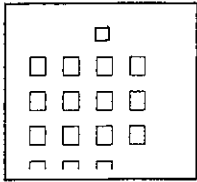
Arlington Room (Approx. 24' x 42'/capacity 75)

Type of Set up Needed: (Please Circle one and state how many chairs and tables needed.)

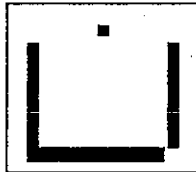
___ **Chairs**

___ **Tables**

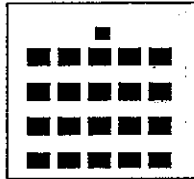
Lecture



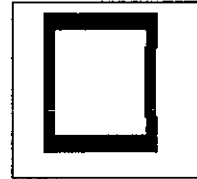
Conference



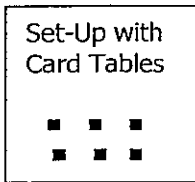
Classroom



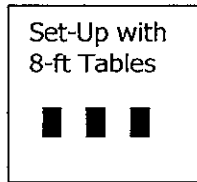
Board Room



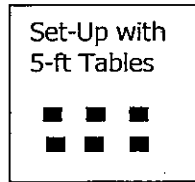
Party - Style A



Party - Style B



Party - Style C



Capacity

Lecture	75
Conference	45
Classroom	55
Board Room	50
Party-Style A	55
Party-Style B	55
Party-Style C	55

The hourly rate begins when you/your group enters the rental space and ends when you vacate the property. An additional fee will be applied beyond the reserved time.

	Hourly Rates (Mon-Thurs)	Hourly Rates (Fri-Sun)
Resident	\$55.00	\$65.00
Non-resident	\$70.00	\$80.00
Commercial	\$95.00	\$105.00
Non-profit	\$50.00	\$60.00
*Museum Household Member	\$41.25	\$41.25

Payment method:

Payment is required in full at least one week prior to scheduled event.

- **Cash**
- **Check** (please make checks payable to **Arlington Heights Historical Museum**).
- **Online** via Arlington Heights Park District website: www.ahpd.org. *Please note: a park district account must be created to pay online.

*Save by purchasing a yearly Museum Membership. Ask a staff member on how to become a member.