

Proof of Insurance required

Verified by _____ (Day/Event Insurance/Or Home Owners)

Date of Request: _____

INDIAN CENTER, INC.

Contact Person: _____

1100 Military Road

Phone: _____

Lincoln, NE 68508 (402)438-5231

Cell: _____

BUILDING RENTAL CONTRACT/AGREEMENT

NAME OF GROUP/FAMILY

GROUP SIZE

AREAS REQUESTED

DATE/TIME

Type of Use (specify handgame, dance, fundraiser, etc.)

The following fee schedule for use of the Indian Center facility will apply to all groups requesting the use of the building for an activity/function.

DEPOSITS AND FEES

<u>GROUP SIZE</u>	<u>DEPOSIT</u>	<u>FEE1</u>
20 or less	\$50.00	\$50.00
20-50	\$75.00	\$75.00
50-100	\$100.00	\$100.00
<u>POW-WOW GROUNDS</u>	\$100.00	\$100.00

(In case of inclement weather, regular building use fees will apply.)

Indian Community Members exempt of building use fees except deposit (subject to change)

BUILDING USER RESPONSIBILITIES (Read and check before signing)

_____ The building users agree to ensure all policies are observed.

_____ Request forms must be completed and signed within 48 hours after a verbal request is made. Deposits must be paid at the time the form is completed or 24 hours before the event.

_____ You must pay with two checks or cash. If you choose to pay by check, one check will be used for the deposit and the other for the room fee.

RENTAL CONTRACT

_____ The person responsible agrees to limit the activity to the requested areas and agrees to keep all individuals out of all other areas of the building.

_____ The person responsible agrees to clean up all areas used, including restrooms and all outside areas.

_____ The person responsible understands that all events end and all areas are to be cleaned by midnight. If the designated staff person has to clean any areas, additional fees will be taken out of the deposit or if necessary ALL of the deposit will be forfeited.

_____ The person responsible understands that smoking is not permitted inside the building and alcohol consumption is prohibited inside or outside of the building. If smoking occurs within the building or if alcohol consumption is evident anywhere inside or outside of the building, the person responsible understands that staff will ask that it discontinue at once. If it is not discontinued, the Police will be notified. Deposits and future use of the building will be forfeited.

_____ The person responsible understands that the Indian Center will not be held liable for any injuries, accidents, lost or stolen personal items or damages to personal property during events held at the Indian Center. Expand to separate with in depth waiver of personal loss and injury

_____ The person responsible understands that in the event damages to the building exceed the amount of deposit fees, the group using the building will be responsible to pay for all costs associated with repairs.

_____ The person responsible understands that Indian Center, Inc. reserves the right to postpone or cancel events if the building should be requested by a member of the Indian community for a wake and a funeral. All deposits and building use fees will be refunded.

STAFF PERSON RESPONSIBILITIES

Staff will ensure the building is unlocked at the agreed time, and lock the building after the event. Staff will also check the building before and after to inspect the condition of the Center before and after the event.

**YOU ARE RESPONSIBLE FOR PROVIDING YOUR OWN
KITCHEN NEEDS & LARGE TRASH BAGS**

HAVE READ, UNDERSTAND, AND AGREE TO THE RULES AS OUTLINED IN CONTRACT.

Person Responsible for Group

Date

Indian Center, Inc. - Staff

Date