

Stamps & Rhine

The Stamps-Rhine Center (SRC) is a jewel in the Near North community. It is a place of comfort for those we serve and a venue of entertainment and value. We are excited that you have considered our venue for your event.

Rental of the facility requires completion of a contract and acceptance of the rules and regulations. Please use the checklist below as a guide for a completed contract.

FACILITY RENTAL CHECKLIST:

- Facility Rental Rules & Regulations
- Facility Rental Agreement
- Proof of Insurance (if applicable)
- Liquor Permit/Licensed Bartender (if applicable)
- Security Deposit (Date is not secured until **\$100 non-refundable** deposit is paid)
- Final Payment Due at least two days before event. (Electronic payment is accepted)

FACILITY RENTAL FEE STRUCTURE:

Rental Fees Hourly Rates: Community Meetings \$50 (2 hours) \$10/additional hours
 Baby Showers/Events (5 year olds, & under) \$75
 Other Events (no alcohol) \$90
 Other Events (with alcohol) \$110

Rental and Facility Usage fees are subject to change without notice

TERMS AND CONDITIONS: The undersigned (Renter) hereby makes application (Agreement) to the Stamps-Rhine Community Center (Facility) and certifies that the information contained herein is correct. Renter agrees to exercise the utmost care in the use of the Facility and further agrees to hold the Facility, its officers, employees and agents, harmless from all damages, liabilities, injuries or losses to persons or property resulting from use of the Facility. Renter agrees to adhere to all rules and regulations on this Agreement and in the Facility Rental Rules & Regulations submitted to and signed by Renter. Renter cannot charge a fee at the door without prior approval from management. Management can insist that you provide security for you event.

The completed Agreement with a non-refundable reservation fee of \$100 (to be applied towards rental charges) and a damage deposit of \$200 are required before the premises may be reserved. Applicants must provide adequate chaperons, as determined by the City, for any function that is attended by any person under the age of 18 years. If liquor is served, Renter is responsible for obtaining all licensing and permits required by the State of Illinois, City of Chicago as well as insurance coverage as outlined below. Renters must leave Facility in a clean and satisfactory condition.

Any Renter (or their guests) found to have damaged or destroyed SRC property will be held responsible for repairs or replacement. In the event of required damages or cleaning, Renter will accept Facility estimate of the amount incurred. This means costs and fees outside of the initial \$200 damage deposit. **INSURANCE:** During the full term of this agreement, Renter shall secure and maintain, at its sole expense, Commercial General Liability Insurance written on an occurrence basis with limits no less than



\$1,000,000.00 combined single limit per occurrence and \$2,000,000.00 aggregate for personal injury, bodily injury and property damage. Coverage shall include, but not be limited to blanket contractual; products/completed operation; broad form property damage; explosion, collapse and underground (XCU) if applicable; and employer's liability. If Renter does not have Commercial General Liability Insurance, Special Events Insurance Coverage must be ascertained through an insurance carrier. Special Events Insurance Coverage referrals are available through SRC. Under all circumstances Renter must provide a Certificate of Insurance evidencing the required insurance before using Facility. If liquor is consumed, the organization/applicant shall procure and maintain for the duration of the agreement Liquor Liability insurance in the amount of \$1,000,000 each occurrence. SRC and its partners shall be named as additional insured on Liquor Liability insurance. Host liquor liability coverage may be substituted when alcohol is consumed and not sold on premises with the prior written approval of the Facility

ALLOWANCE OF LIQUOR AT FACILITY: As indicated by our insurance policy, liquor will be administered with discretion at our facility. We reserve the right to refuse the consumption of liquor at certain events as well as it is our intent to abide by all laws of the state regarding the consumption of alcoholic beverages. Alcoholic beverages must be consumed inside of the facility. Any consumption taking place within a certain perimeter outside of the facility will result in the IMMEDIATE shut down of your event and loss of the rental fees and deposit. Further, no patron will be allowed to leave the venue with open liquor at any time. Renter is responsible to make sure that their guests abide by these rules. Failure to do so can/will result in the interruption of your event.

SMOKING ON PREMISES: Stamps-Rhine Center is a private non-smoking facility. Smoking is NOT allowed on the premises or in front of our facility or the residential buildings on the block. Violation of this policy will result in the IMMEDIATE shut down of your event and loss of the rental fees and deposit. It is the responsibility of the Renter to make sure his/her guests adhere to these rules. Smoking is relegated to the designated area outside the facility. Please be sure to advise your guests of this policy as we are unable to accommodate any smoking at this site.

SET-UP/CLEANING PROCEDURES: The renter will be allotted a 30-minute set up period, and 30 minute break down period. Any times beyond that will be assessed a fee or can take place within the paid rental times. If you have an outside decorator, their time of arrival should be spelled out in the contract. They do not get to automatically get to set up outside of the allotted 30-minute set up period. The organization/renter is responsible to clean and leave the premises in the same condition as when it arrived. This includes clearing walls and ceiling of all tape and decorations; wiping down chairs and tables, disposing of all trash, and removing all food from the center. All cleaning must be done immediately after the event. The cost of any additional cleaning or repairs required will be charged to the organization/applicant. **DAMAGES:** Chairs \$25, Round Tables \$140; Banquet Tables \$125; Damages to walls, mirrors, windows, or other fixtures will be billed to the renter. All tape, adhesives, and decorations must be removed without damage. PEP is not responsible for any items left overnight.



Stamps-Rhine Community Center Rental Agreement

I, _____ (Renter) hereby express interest in renting the Stamps-Rhine Community Center/SRCC (Facility) and consent to following all applicable rules and regulations, for the purposes of (event) _____ on (date) _____ commencing (start time)*: _____ and concluding (end time)*: _____. ** Please note: your start time includes a 30 minute prior to set up time, more than 30 minutes will require an additional fee. At the end time, all guest should be clear of the facility within 30 minutes. If your event goes longer than the stated end time an additional hour fee will be assessed.*

Name of Organization/Renter: _____

Contact Person: _____

Address _____

City: _____ State _____ Zip: _____

Cell: _____ E-mail: Address: _____

Alternative Contact/Phone: _____

Is this event open to the public? Yes No Note: Stamps-Rhine Center requires that events are closed to the public. Any event open to the public must be pre-approved in advance.

Is there a ticket cost / charge for admission: _____? Approved: _____

Will alcohol be dispensed? _____ If yes, method: _____

NOTE: We refuse the right to refuse any rental for any reason without providing cause.



Signatories

Applicant's Printed Name _____

Applicant's Signature _____

Date _____

Type of Event: _____

Expected number of attendees: Youth _____ + Adults _____ = Total _____ Is your organization a not-for profit - 501 C(3)? Yes No If yes, please provide documentation.

Please remit all payments to: "PEP Stamps-Rhine Community Center"

Please Do Not Write Below This Line

Request Received by: _____ Date: _____ Approved: Yes No

Date _____ By: _____ Total Rental Amount: _____

SRCC Representative's Printed Name _____

SRCC Representative's Signature _____

(Please provide an itemized listing below): Service Fee Deposit Paid: Yes No Date _____

By: _____ Balance Due: _____ Due Date: _____

Refund: Yes No Check Number _____ Dated _____ Initials _____

Additional Notes or Comments: