

Village of Shiloh Klucker Hall Basement 14 Park Drive --- Shiloh, Illinois 62269

Village Phone: 632-1022 ext., 119 After Hours: 618-581-5730 e-mail: squitmeyer@shilohil.org

CONTRACT FOR KLUCKER HALL BASEMENT

Name: _____ Date of Rental: _____

Address: _____ Type of Event: _____

City/State/Zip: _____ Number of People: _____

Telephone #: _____ Start time: _____ End Time _____

Driver's License #: _____ Email: _____

- KLUCKER HALL BASEMENT:** Resident: \$200.00 – DEPOSIT: \$300.00.
 Non-Resident: \$400.00 – DEPOSIT: 300.00
 Glitter & Confetti Charge \$100.00

Rental is due one month before the event. We accept checks or cash. Deposit may be refunded, if facility is left in clean condition and items 3-11 are completed. Cancellations must be made **48 hours before the event** for the deposit of \$150.00 to be refunded.

1. This area seats approximately 120 people.
2. Rental is for 8 hours and may not exceed 11:00 p.m. with one half hour allowed to vacate the hall. Renter is held responsible for any damages made to the hall or floor and loss of equipment from the kitchen.
3. ___ Please no tape, tacks or adhesive strips on the walls or ceiling tiles and grids.
4. ___ Please do not take pictures off the walls.
5. ___ Please cover tables.
6. ___ Bring wash cloths to wipe off tables.
7. ___ Sweep the floor. (Broom in supply closet)
8. ___ Please place trash bags in dumpster in the gated area by Klucker Hall.
9. ___ Check the restrooms (flush toilets, faucets turned off and lights turned off).
10. ___ Turn off all lights in the hall.
11. ___ If tables and chairs are moved, please return them to original set-up.

Please do not move blinds up and down.

The Village of Shiloh will not be held responsible for, injuries, accidents or any lost articles from guests or renters.

You may pick up the key on _____ between the hours of 7:00 a.m. and 3:00 p.m. at the Municipal Building, 1 Park Drive.

Please return the key to the Municipal Building the next business day: _____

Renter _____ Date _____
Office Use:

Village Representative _____ Date _____

Deposit Fee: \$ _____ Cash Check # _____ Date Deposit Fee Paid: _____
Rental Fee: \$ _____ Cash Check # _____ Credit Card ____ Date Rental Fee Paid: ____
Returned Deposit: Date: _____ Received by: _____