

Williamson County Historical Museum
Rental Contract for the
Williamson County Courthouse Conference Room

I/We have read and agree to the conditions set forth herein. I/We understand that the Williamson County Historical Museum, Inc. and Williamson County are *not* responsible for any liability, including (a) loss/theft of personal property, (b) accidental/personal injury to guests, or (c) damage to Williamson County Courthouse facilities occurring during, or resulting from, any event named in this contract. I/We understand that rentals of the Williamson County Courthouse Conference Room are only available Wednesday through Saturday between 9:00 am and 10:00 pm.

I/We understand that event dates cannot be reserved more than 12 months in advance from the date the contract is signed. I/We further understand that the \$100 required deposit fee serves as a security deposit and holds the date for the event; it will be returned after the event if no damage occurs and the room is returned to the condition in which it was in when entered. The deposit fee is *not applied* toward the hourly rental fee, which is an additional cost due one month prior to the event. However, if the event goes beyond the agreed ending time, \$25 will be deducted from the deposit for *every additional half hour* past the agreed time. By signing below and on Policy and Procedures form, renter also agrees to the terms in the Williamson County Courthouse Rental and Special Event Policy and Procedures document.

Please print the name of the contact person and company or organization if applicable; if the event is a wedding, provide names for both the bride and groom. At least one signature is required to complete the contract.

Print Contact Name

Print Name

Contact Signature

Signature

(_____) _____
Contact Phone Number Extension

Company or Organization, if applicable

Address
(Any refunds will be mailed to the above address.)

City

State/Zip Code

EVENT Date: _____ Time: From _____ AM/PM To _____ AM/PM

(This must include set-up and clean-up times. Two (2) hours minimum; four (4) hours maximum)

TOTAL ANTICIPATED COST (NOT including \$100 deposit)

Event Time _____ Hrs. @ \$25.00/Hr. = \$ _____

_____ Sheriff Deputy _____ Hrs. @ \$40.00/Hr. = \$ _____

_____ Sheriff Deputy Car _____ Hrs. @ \$12.00/Hr. = \$ _____ **TOTAL DUE: \$ _____**

Museum Representative

Date

10/2007

716 S. Austin Ave., Georgetown, Texas 78626/ 512-943-1670/ www.wchm-tx.org

Contact: Mickie Ross

Email: mross@wilco.org