



**Antioch Historical Society**  
 1500 W 4th Street  
 Antioch, CA 94509

Date of Event: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Agreement Rcvd By: \_\_\_\_\_  
 Board Member: \_\_\_\_\_

**Museum Building & Grounds Rental Agreement**  
 Phone (925) 757-1326

(Please Print)

**Contact Person** (NOTE: All arrangements will be made through this person only) **Date of Application:** \_\_\_\_\_

Last Name: _____	First Name: _____
Organization (if applicable): _____	Non-Profit #: _____
Address: _____	City: _____ Zip Code: _____
Contact Phone: (____) _____	Email: _____

**Rental Function Information**      **NOTE: #Numbers refer to P-2: Rental or Use of Buildings & Grounds Rules**

<input type="checkbox"/> Riverview Room (120 max seated)	<input type="checkbox"/> Theater (25 max)	<input type="checkbox"/> Meeting room (20 max)
<input type="checkbox"/> Outside Grounds, including Gazebo (Over 75 persons requires Use Permit from Community Development Dept. of City of Antioch)(#8)		
Event Date Requested: _____ Circle one: Sun Mon Tue Wed Thu Fri Sat		
Hours of Use: Set-up/Decorate	Date: _____	_____ a.m. / p.m. - _____ a.m. / p.m.
Function	Date: _____	_____ a.m. / p.m. - _____ a.m. / p.m.
Take down/Clean-up	Date: _____	_____ a.m. / p.m. - _____ a.m. / p.m. Total Hours of Use: _____
Type of Function:	<input type="checkbox"/> Meeting	<input type="checkbox"/> Wedding
	<input type="checkbox"/> Fundraiser	<input type="checkbox"/> Other: _____
Will alcohol be available? (#4)	<input type="checkbox"/> Yes <input type="checkbox"/> No	(Beer & Wine Only)
Will alcohol be sold? (#4)	<input type="checkbox"/> Yes <input type="checkbox"/> No	(Beer & Wine Only) If yes, ABC & RBS License required.
Will Security be required? (#4d)	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, by whom? _____
Will food be provided? (#17)	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, by whom? _____
Will there be decorations? (#12)	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please describe: _____
Will the function be open to the public?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Anticipated Attendance: _____	(#8) Number of Children in attendance: _____	
I understand that the above date is being held pending Antioch Historical Society approval. The charges are estimates only and will be finalized at the final meeting. All agreements must be in writing, no verbal approvals or agreements.		
Signature: _____	Date: _____	

**THIS IS A WAIVER AND RELEASE: READ IT CAREFULLY BEFORE YOU SIGN IT.**

My signature certifies that I have read and received a copy of the General Rules and Rental Fees as set forth by the Antioch Historical Society P2-Rental or Use of Buildings and Grounds Policy dated November 29, 2023, governing the use as specified above; that I will take full responsibility for seeing that the use of these facilities/area by the organization/group I represent is in full adherence and compliance with the General Rules; that I hold the Antioch Historical Society harmless from any damage, claim for damage for personal injury or death, damage to or loss of property incurred in the use of these facilities/area; that if there are any minors in the group using the facilities/area, I will accept full responsibility for them throughout the period covered by this agreement with the Antioch Historical Society. . I HAVE READ THIS RELEASE AND RENTAL POLICY CAREFULLY. I UNDERSTAND AND ASSUME THE RISK INVOLVED. BY SIGNING, I GIVE UP MY RIGHT TO LEGAL ACTION AGAINST THE ANTIOCH HISTORICAL SOCIETY ITS OFFICERS, OFFICIALS, EMPLOYEES AND VOLUNTEERS. **I AGREE I WILL BE ONSITE DURING THIS EVENT.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Museum Building & Grounds Rental Agreement

Phone: (925) 757-1326

Date of Event: \_\_\_\_\_

Contact Person: \_\_\_\_\_

## 1. Government Agencies or other Historical Societies (If not Government Agencies or other Historical Societies go to 2)

Description	Amount Due
Event Fee – Government Agencies or other Historical Societies (all areas)- \$200.00 per day	\$
<b>Subtotal :</b> (Then go to 3)	\$

## 2. Other Renters

Description	Amount Due
Rent – General Public (areas)	
Outside Grounds/Gazebo/BBQ - \$125.00 per hour - 4 Hr. Min.: Total hours of use: _____	\$
Riverview Room - \$125.00 per hour – 4 Hr. Min.: Total hours of use: _____	\$
Theater and Meeting Room - \$50.00 per hour – 2 Hr. Min.: Total hours of use: _____	\$
<b>Subtotal :</b>	\$
Non-Profit 501(c)3, Active Military, AHS Board Members and Qualified Volunteers receive a 35% discount (Subtract 35% from Other Renters Subtotal)	( )
<b>Subtotal:</b> (Then go to 3)	\$

### Attachments:

- P-2: Rental or Use of Buildings & Grounds (4 pgs)
- F-52: Guide to Event Food Service on Museum Property/RS Guide to Recycling
- F-46: Zero Tolerance for Harassment or Discrimination

### Form Distribution:

- Original to Rental Book
- Copy to Renter
- Copy to Rental Coordinator
- Copies to Office Manager, Bookkeeper, & Treasurer

### Office use only:

Purpose and amount of Refund:		
Description	Amount	
Event Fee – Government Agencies or other Historical Societies	\$	<b>If cancelled, date of cancellation:</b> _____ <b>Deduction explanation:</b> _____ <b>Refund authorized by:</b> _____ <b>Authorized date:</b> _____ <b>Refunded to:</b> _____ <b>Date of Refund:</b> _____ <b>Check number:</b> _____ <b>Amount of check:</b> \$ _____
Rent	\$	
Deposit to hold date	\$	
Set-up/Take-down Fee	\$	
Table & Chair Rent	\$	
Security Deposit	\$	
<b>TOTAL DUE</b>	\$	

## 3. Other Fees

Description	Amount Due
Deposit to hold date (May be applied to rent)	\$100.00
Society Set up/Take-down Fee - \$200.00	\$
Set up-breakdown (other than day of the event) – \$75.00 per hour	\$
Table & Chair Rent (# tables + # chairs)	
Outside Chair - \$1.00 per chair	
Outside Table - \$3.00 per table	\$
<b>Subtotal:</b> (Then go to 4)	\$

## 4. Rate Calculations

Description	Amount Due
Subtotal from 1 or 2	\$
Subtotal from 3	\$
Security Deposit (refundable barring damage or waste sorting)	\$500.00
<b>TOTAL DUE (14 calendar days before event)</b>	\$

## Payments

Description	Check No.	Date Rcvd.	Rcvd. By	Amount Rcvd.
Deposit To Hold Date				\$
Remainder Balance Due Payment				\$
<b>TOTAL Paid (14 calendar days before event)</b>				\$