

Facility Rental Request

510 Building - 510 W. Main St

Please Complete and return via email to mainstreet@pvt.net

Today's Date _____/_____/_____

*Contact Person: _____ Title _____

*Primary Contact # _____ Second # _____

*Mailing Address _____ City _____ State _____ Zip _____

*Email _____

Type of Event: _____

Expected Attendance (Max capacity: 65): _____

Fees:

- \$150 or \$75 non-profit 501(c)3 [**\$50 non-refundable deposit required within 48 hours of booking. \$25 for 501(c)3**]

Date building requested: (example: Saturday, 04 / 28/ 18) _____, _____/_____/_____

Event start ____ : ____ AM PM Event End ____ : ____ AM PM

Set up date _____/_____/_____ Set up time ____ : ____ AM PM Tear down and clean up ____ : ____ AM PM

OFFICE USE: Staff needed _____ : _____ AM PM until _____ : _____ AM PM
from

Doors opened: _____ : _____ AM PM

Alternate Date building requested: (example: Saturday, 04 / 28/ 18) _____, _____/_____/_____

Event start ____/____/____ : ____ AM PM Event End ____ : ____ AM PM

Set up date _____/_____/_____ Set up time ____ : ____ AM PM Tear down and clean up ____ : ____ AM PM

OFFICE USE: Staff needed _____ : _____ AM PM until _____ : _____ AM PM
from

Doors opened: _____ : _____ AM PM

Table/Chair Rental

*Rental through Artesia Arts Council – all payments for rented items will be separate and payable to “Artesia Arts Council” – Please call 575-746-4212 to schedule –
Artesia MainStreet is not responsible for table & chair delivery or set up*

Table, Tablecloth, & Chair Rental Fees

**Please Check which kind and how many*

- Tables \$8 Each**
- 60” Round Tables _____
 - 8ft Tables _____
 - 6ft Tables _____
 - Bistro Tables _____
- Chairs**
- Chairs \$2 _____

Special Requests and Instructions:

TERMS & CONDITIONS

- Completion & submission of form does not guarantee facility request approval.
- Application will be Approved or Denied within 7-10 business days of submission.
- If approved Contract and Rental quote will be issued.
- **There is a \$50 non-refundable deposit due within 48 hours of application approval.**

Applicant Signature: X _____ Date _____/_____/_____

Office Use Only

Date available _____/_____/_____ Approved by: _____ Date _____/_____/_____

- | | | |
|---|--|---|
| <input type="checkbox"/> Deposit paid | <input type="checkbox"/> Rental Fee \$ _____ | <input type="checkbox"/> Facility Rental Agreement |
| <input type="checkbox"/> Tables and chairs \$ _____ | | <input type="checkbox"/> Proof of Liability Insurance Y / N |
| | | <input type="checkbox"/> 501C3 # _____ |
| | | Quoted _____/_____/_____ Total \$ _____ |