HIS PLACE RENTAL POLICY

 $989\text{-}463\text{-}1676 \; hisplace alma@gmail.com}$

Date of Rental: Times:			
Conta	ct Per	Son (21 yrs or older):	
Addre	ess:	Phone:	
Room	s Requ	uested:	
	-		
Contact I	Person is i	responsible for the following:	
1.	Rental fee due before time of rental.		
2.		se proper use of all equipment	
3.	Be prepa	ared to handle emergencies	
	a.	Location of first aid kit and blood born pathogen bucket	
	b.	Contact emergency personnel- 911 / Steve Karp 989-326-3440	
	c.	Location of fire extinguishers	
	d.		
4	e.	Location of A.E.D.	
4.		and that office area and storage closet are not available for use.	
5. 6.	No pets.	cles or rollerblades allowed in the building,	
7.		<u>.</u> holic beverages.	
8.		balloons must be tied down.	
9.		time limits of rental.	
_		ables and chairs in Family Room, counters, stove and kitchen equipment used.	
		oom usage:	
	<u>а.</u>	Game Room to be supervised by an adult at all times.	
	b.	No food or drink in Game Room.	
	c.	Turn off all games including air hockey table.	
12.	Gym usa	age	
	a.	Bring separate gym shows to play on the gym floor.	
	b.	No dunking of hanging on rims.	
	c.	No food or drink on gym floor (except for banquets/open houses.)	
	d.	Clear, non-staining punch only.	
	e.	Music must be appropriate- Christian or non-swearing/suggestive messages.	
	f.	No metallic confetti.	
13.	<u>Before y</u>	<u>/ou leave:</u>	
	a.	All equipment is to be returned where it was found.	
	b.	Check bathrooms/locker rooms for lights, items left behind.	
	C.	Turn off ceiling fans & all lights.	
	d.		
	e.	Lock all exits and confirm they are locked by pushing and pulling on the doors.	
	I have re	ead and understood the above rules and regulations and agree to abide by them. I agree that I am financial	
\cup		ibly for any damage incurred to the equipment and the building and contents during my rental.	
		to any damage mean early to the equipment and the ballaning and contents daming my remain	
	I will not	t hold His Place liable for any injury that may occur during my rental.	
	Any cano	cellation must take place within 72 hours of event or deposit will not be refunded.	
Contact Person Signature: Date:			
His Place	e Directo	or Signature:	
Deposit	Paid:	Date:	

m Entry Doors