



# Facilities Rental Form

This completed form and the deposit fee (\$100) are required to ensure the availability of the requested rental period.  
Note: The deposit fee will be returned by mail after the event, if all conditions of the contract have been met.

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

Time of Event (two hours): \_\_\_\_\_

Renter's Name and Address:

Partner's Name and Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Phone # \_\_\_\_\_

Home Phone # \_\_\_\_\_

Cell # \_\_\_\_\_

Cell # \_\_\_\_\_

Work # \_\_\_\_\_

Work # \_\_\_\_\_

Location to be used: \_\_\_\_\_

Total number of people expected to attend: \_\_\_\_\_

## **RENTAL FEES**

Wedding \_\_\_\_\_

Rehearsal \_\_\_\_\_

TOTAL \_\_\_\_\_

Deposit \_\_\_\_\_

Paid on Date \_\_\_\_\_

**BALANCE DUE** \_\_\_\_\_

To be paid by \_\_\_\_\_

Make check payable to: *Shoal Creek Association*

Return this form to: Shoal Creek Association, 7000 NE Barry Rd, Kansas City, MO 64156

ShoalCreekMuseum1975@gmail.com

Rental form reviewed by: \_\_\_\_\_