



Sanilac County Historic Village & Museum (SCHS)
228 South Ridge Street, Port Sanilac, MI 48469
810-622-9946 (office)
810-841-3814 (Cathy, Event coordinator)
weddingsatschs@gmail.com

EVENT RENTAL AGREEMENT

DATE: _____ **TIME:** _____

(3-hour max unless prearranged)

Rehearsal Date/Time: _____

(1 hour max)

Which Facility:

_____ Village Church \$350
Seating for 100

_____ Loop-Harrison Mansion \$350 (first floor only)
seating for 20

_____ Pavillion / Patio \$500
seating for 96

_____ Trail Ceremony \$500

_____ All Inclusive Wedding Package \$1500

Date \$250 Security rental deposit received: _____ balance due: _____
balance received: _____

Date \$100 damage deposit received: _____ *(Please postdate this check with your event date.)*

Security deposit payment and damage deposit must be in two separate checks.

ALCOHOL TO BE SERVED? Yes _____ **NO Alcohol** _____

You are required to hire our bartender(s) for your event.

Brides Name _____ Phone _____

Grooms Name _____

Email _____

Prefer text or email _____

Mailing Address _____

GENERAL INFORMATION:

- Rentals available between 11 am – 11pm. If event rental time exceeds 5pm compensated event staffing is obligated. (See On Site Equipment Rental)
- You, your personal belongings and guests must vacate the property per the agreed upon end time.
- Your rental entitles you to your building of choice, comfort station and grounds for photos.
- No smoking is allowed in any building on Museum property.
- Only bird seed may be thrown, no confetti or rice allowed.
- Only electric candles are allowed, please respect our historic buildings, no tape, tacks, staples, etc. **anywhere.**

THE FINE PRINT: (Please initial next to each)

_____SCHS assumes no responsibility or liability for personal property or equipment brought onto or left on premises by guests.

_____The renter is responsible for any damage to buildings or grounds and shall remove any and all decorations, including flowers at the conclusion of the event term. If SCHS determines damage has been sustained, the deposit will be forfeited and if necessary financial reimbursement will be sought. If financial reimbursement is not forthcoming, collection and legal action may be pursued.

_____SCHS coordinators are volunteers and only present to oversee usage of buildings and grounds.

_____If placing an event tent on Museum property, you will be instructed by staff as to location. You or your representative must be present when the tent is delivered and set up on property.

_____Any matters not specifically covered in this agreement shall be subject solely at the discretion of SCHS.

ALCOHOLIC BEVERAGES:

If alcohol is to be served, the responsible party/renter must provide a copy of **Event Liability Insurance, no later than 30 days prior to the event.** (certificate should list Sanilac County Historical Society as additionally insured)

No staining beverages are allowed in the church or The mansion. i.e. white wine only.

CANCELLATIONS, CHANGES AND REFUNDS:

- If you need to cancel, please make sure you contact us at least 60 days prior to the event date and the deposit will be refunded, less 5%.
- If you cancel less than 60 days prior to the event date, the renter may forfeit all fees paid.

SCHS cannot accept responsibility for cancellations due to weather, natural disasters, or other acts of God. All the above restrictions and penalties may apply.

PAYMENT:

- Payment shall be made in two separate checks, payable to SCHS.
- At the time of booking, SCHS requires a \$250 deposit, with the remaining balance due 30 days prior to your event.
- A damage deposit in the amount of \$100 will be required to ensure proper care is taken of our buildings and grounds. If SCHS staff determines there is no damage to facilities or grounds or that excessive cleaning is required, the deposit shall be refunded within 2 weeks after your event.

My signature and submission of the Event Rental Agreement certifies that I have read, understand and will honor the terms of this rental agreement.

Renter Signature: _____

Date: _____

Renter Signature: _____

Date: _____

SCHS Signature: _____

Date: _____

Event Coordinator Signature: _____ Date: _____