



COUNTY OF WINNEBAGO

Veterans Memorial Hall Rental Agreement

SPACE FEE \$ _____ FOR ROOM: Lincoln Lyceum
SECURITY FEE \$ _____ Library
TOTAL RENTAL COST \$ _____ Conference Room

Name of Organization/Individual: _____ Type of event: _____

Address: _____
Street City State/Zip Code

Phone: _____ Fax: _____

Email: _____

If requesting more than one date, please fill out a separate sheet for each date being requested.

Rental Date: _____
Month/Date/Year

Fees are based on opening and closing times

Time to Open: _____ AM PM Time to Close: _____ AM PM

Event Time From: _____ AM PM To: _____ AM PM

There are twenty (20) five foot round tables and two hundred (200) chairs available for your use.
Veterans Memorial Hall staff members are not responsible for setup or tear down before or after your event.

RESPONSIBLE AGENT

Name: _____

Home Address: _____
Street City State/Zip Code

Phone: _____ Cell: _____

Email: _____

VETERANS MEMORIAL HALL

DIRECTOR SIGNATURE: _____ DATE: _____

RESPONSIBLE PARTY

SIGNATURE: _____

Meeting space reservations need to be made in advance by contacting:

Veterans Memorial Hall
Attn: Scott Lewandowski
211 N. Main St
Rockford, IL 61101
(office) 815.969.1999
(cell) 815.262.4966
Fax 815.969.1998

Director@VeteransMemorialHall.com



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VETERANS MEMORIAL HALL HAS THREE (3) ROOMS AVAILABLE FOR RENTAL:

- A. Lower Level Conference Room with space for 50
- B. Library with space for 75
- C. Lincoln Lyceum/Auditorium with space for 200 plus an additional 150 seat balcony

A Veterans Memorial Hall Rental Release is required for all rentals.

Rates include **(4) four hours** of standard security, and opening/closing fees. Extra security fees **(\$ 50.00 per hour)** will be required for events over four hours.

Additional security fees **(\$ 50.00 per hour/per security personnel)** may be required.

The **Lower Level Conference Room** and **Library** meeting space fees based on four hours of use are as follows:

Monday-Friday	Mornings or afternoons	\$ 50
Monday-Friday	Evenings	\$125
Saturday or Sunday	Mornings or afternoon	\$150
Saturday or Sunday	Evenings	\$250

The **Lincoln Lyceum/Auditorium** meeting space fees are as follows:

Monday-Thursday	Evenings	\$200
Monday-Friday	before 5:00pm	\$200
Saturday or Sunday	before 5:00pm	\$500
Friday, Saturday or Sunday	After 5:00pm	\$500

ADDITIONAL CHARGES:

- Early or Late Use (Before 8:00 AM and after Midnight) - \$25.00 per hour additional fee

Veteran's organizations and Veterans Memorial Hall's related activities will have first preference for use of the facility.

Veterans groups and Veterans events shall not be charged a space fee for the use of meeting rooms and Lincoln Lyceum-Auditorium.

Meeting rooms may be reserved by groups and organizations up to six (6) months in advance on a first-come, first-serve basis. Veterans may reserve the lower level meeting space on a regular basis (e.g. 1st Tuesday of the month).

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RENTAL GUIDELINES/TERMS OF USE

1. **POSITIVELY NO SMOKING ON THE PREMISES.**
2. Individuals representing groups must be twenty one (21) years of age or older. **State ID required.**
3. Rental reservation must be made in person with a paid reservation deposit of \$50.00 which is applied to the rental fee. You may also be required to pay any other applicable fees upon rental reservation.
4. Rental space reservations can be made weekdays with the Veterans Memorial Hall Office between 9 AM to 5 PM.
5. Groups needing special equipment, clean-up, set-up, must provide for this at their own expense and must obtain the prior approval of the Veterans Memorial Hall director
6. Veterans Memorial Hall shall regulate the opening and closing of the appropriate space as required.
7. A refundable \$200 security deposit may be required. The Responsible Party may also be subject to a minimum charge of \$200 for clean-up above their original costs.
8. All groups must follow general safety and security guidelines. Any group that abused the building and/or its contents will forfeit its security deposit and be denied future use of the building.
9. All furniture and fixtures belonging to the County of Winnebago shall remain in Veterans Memorial Hall and shall not be removed and/or loaned out from the building.
10. Any use of hazardous materials and/or **candles** is prohibited. No flammable materials, i.e., straw bales, trees, should be brought in. Silly String, bubbles/rice and/or bird seed is prohibited. Nails, staples, tacks or tape may NOT be used on any surface. No additional decorations or equipment may be brought into the building without the approval of the Building Director.
11. All groups renting space in Veterans Memorial Hall shall, upon the conclusion of their event, promptly remove and properly dispose of all garbage, paper, pamphlets, literature, etc. A dumpster located at the Northwest corner of the building may be used to dispose of these items.
12. The applicant is responsible for managing behavior of all attendees. Adult supervision is required for any group of minors. Disregard of policies, misconduct by participants, or misrepresentation on the application will result in rejection of future use. **In the event of severe misconduct, the on-site security personnel may immediately terminate the event/meeting and clear the premises.**
13. Veterans Memorial Hall retains the right to make spot checks at all functions. Violations of this agreement will prompt Veterans Memorial Hall to terminate the event and no refunds will be provided. Illegal activity or unruly conduct will be prosecuted to the full extent of the law.
14. Winnebago County does not endorse the views expressed by any group using Veterans Memorial Hall.
15. Provisions of this policy may be waived or amended under special conditions only by approval of the Veterans Memorial Hall director and/or the Winnebago County administration.

Applicant's Signature _____

Date _____

Name of Organization

Applicant's relationship to organization

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The Undersigned, being of lawful age, desires to enter upon the premises of Veterans Memorial Hall and use its facilities, and being duly aware of the risk of injury and hazards inherent upon entering upon said premises and using its facilities, hereby elects voluntarily to enter upon said premises and use those facilities.

Therefore, each of the Undersigned for and in consideration of their permission to enter upon and use said premises and facilities, do hereby voluntarily assume all risks of loss, damage, or personal injury, including death, that may be sustained by any or each of the Undersigned which may hereinafter occur on account of or in any way growing out of the entry upon the premises and use of the facilities. The Undersigned also releases Veterans Memorial Hall employees, the County of Winnebago, Illinois and its employees and agents from any claims resulting from entry upon the premises and use of the facilities.

The Undersigned further expressly understands and agrees to indemnify and hold harmless Veterans Memorial Hall employees, the County of Winnebago, Illinois and its employees and agents from and against any and all claims for damages, costs, or expenses asserted against or incurred by Veterans Memorial Hall employees, the County of Winnebago, Illinois and its employees and agents as a result of any accident, injury, or property loss which may occur while the Undersigned is upon said premises and which may result from any actions or inactions of the Undersigned, Veterans Memorial Hall employees, the County of Winnebago, Illinois and its employees and agents, third parties, or any combination thereof.

In consideration for use of the described premises, the Undersigned agrees to be responsible for any physical damage or loss, ordinary wear and tear excepted to the premises regardless of the cause of damage or loss.

I also agree that the Renter is solely responsible for any claim or liability that arises as a result of the serving of alcohol at the event.

If any portion of the Release is held to be unenforceable, all other parts will remain in effect.

CAUTION: READ BEFORE SIGNING

Date: _____

Applicant's Signature

Organization Representatives Signature

Print Name

Print Name

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Authorization to Serve Alcohol Request Form

This form and all required documents must be presented for approval 30 days prior to your event at the office of Veterans Memorial Hall.

RESPONSIBLE AGENT

Name: _____

Home Address: _____
Street City State/Zip Code

Phone: _____ Cell: _____

Email: _____

Event Information: Event Name: _____

Date of Event: _____ Type of Event: _____

Hours Alcohol Will be Served? _____ Estimated Attendance _____

Caters information: Caters Name: _____ Caters license # _____

Type of Alcohol being served? (Check all that apply) Beer & Wine Full Bar Tasting Other (please list) _____

Requirements:

- Completed Authorization to Serve Alcohol Request Form
- Copy of Caters City of Rockford Caterers Liquor License
- Copy of Caters Dramshop Insurance Certificate naming **Winnebago County** as additional insured

Approval Signatures:

Veterans Memorial Hall Director: _____ Date: _____

Winnebago County Administration: _____ Date: _____

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