



# RENTAL CONTRACT

(USE FOR NON WEDDINGS ONLY)

DIXIE STATE UNIVERSITY ALUMNI HOUSE

[www.dixie.edu/alumnihouse](http://www.dixie.edu/alumnihouse) 435-879-4535

Date: \_\_\_\_\_

Name of Person Responsible/Renter: \_\_\_\_\_ Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Are you a Dixie State Alumni? Yes / No      How did you hear about us? \_\_\_\_\_

**Type of Event:** (Check all that apply)

**Event Date:** \_\_\_\_\_

- Banquet      Time \_\_\_\_\_ to \_\_\_\_\_
- Baby / Bridal Shower      Time \_\_\_\_\_ to \_\_\_\_\_
- Conference/Meeting      Time \_\_\_\_\_ to \_\_\_\_\_
- Other      Time \_\_\_\_\_ to \_\_\_\_\_

**Rooms / Areas to be rented:** (Check all that apply):

- Great Room     Kitchen     Gardens     Bridal/Groom Rooms     Conf. Room

**Rental Fees:**

	Regular	Alumni	Total
<input type="checkbox"/> 2 Hour Minimum	\$250.00	\$200.00	\$ _____
<input type="checkbox"/> Additional Hours – Each additional hour	\$100.00	\$100.00	\$ _____
<input type="checkbox"/> Linens - White / Cream # Round ____ # Buffet ____	\$7.00	\$7.00	\$ _____
<input type="checkbox"/> Microphone / Speaker	\$150.00	\$150.00	\$ _____
<input type="checkbox"/> Screen	N/C	N/C	
<input type="checkbox"/> Other _____	_____	_____	\$ _____

Total Rental Costs      \$ \_\_\_\_\_  
 Less Security Deposit      Date Pd \_\_\_\_\_ Cash/Ck # \_\_\_\_\_ \$ \_\_\_\_\_  
 Total Due      Date Pd \_\_\_\_\_ Cash/Ck # \_\_\_\_\_ \$ \_\_\_\_\_

(Remaining Balance due 30 days prior to event)

### Policy Agreement

By signing below you agree that you have read and understand the Alumni House Use Policy (on page 2 of this document) and agree to use the Dixie State University Stephen and Marcia Wade Alumni House in accordance with the following:

1. I understand that no alcoholic beverage or tobacco product can be served on the DSU premises.
2. I understand that no interior candles with an open flame are allowed, unless used on a candle warmer.
3. I understand that the Alumni House provides parking on the street. I will inform my guests that the Alumni House is not responsible to pay for tickets guests receive for parking violation.
4. I understand the cancellation and refund policy.

Renter Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

DSU Alumni Office Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



USE, CANCELLATION & DAMAGE POLICY CONTACT  
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DIXIE STATE UNIVERSITY ALUMNI HOUSE  
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The Renter, \_\_\_\_\_, acknowledges that alcohol, tobacco, firearms and illegal drugs are not permitted on the Dixie State University Campus or in any University building according to Utah State law; this includes the Stephen and Marcia Wade Alumni House. If the University has reasonable suspicion that illegal drugs, tobacco, firearms, or alcohol are present in or about the Wade Alumni House, the renter agrees to give the University authority to conduct a reasonable search to ascertain the same. The renter acknowledges that any such use or possession will constitute a breach of this agreement and will result in the immediate eviction of any violators, including the removal of the entire renting group at the discretion of Dixie State University officials.

Renter acknowledges that there is no access to the roof. There is to be nothing stuck to walls and painted surfaces, inside or out, including nails and/or glue. No direct metal can be used on the wood floor. Stakes cannot be driven into the ground without the permission of the Wade Alumni House gardener. Driving on the grass is prohibited. All set up needs prior approval. Interior candles with an open flame are prohibited, unless used on a candle warmer. A date deposit of \$100 is required at the time of the rental agreement. The date deposit is required to hold rental date. If damage is found after the event, the renter will pay the damages occurred. If damage is viewed beforehand, it needs to be pointed out to DSU personnel.

I, \_\_\_\_\_, the undersigned, in consideration of Dixie State University, an institutional member of the Utah System of Higher Education, with the principal office in St. George, Utah, do hereby freely and voluntarily agree to release, save, hold harmless, and indemnify Dixie State University and Alumni Association from any and all claims or loss; injury; damage; suit action; demand; fine; judgment or decree; and any expense thereof, including reasonable attorney's fees, that may happen or occur to me, or anyone associated with me, as a result or in consequence of our using the Stephen and Marcia Wade Alumni House, whether the same is caused by the negligence of the University or of its officers, agents, employees, or otherwise.

I understand that I am responsible for obtaining all food necessary for any event associated with use of the Alumni House. I understand that the DSU Alumni House is not responsible to pay for tickets guests may receive for parking violations.

I understand for each additional hour beyond the agreed rental timespan, the renter will pay \$100 per each additional hour.

I further agree to hold the University and the DSU Alumni Association harmless from injury or damages occurring to third parties as a result of the actions of myself or others using the Wade Alumni House in connection with the event that I sponsor and represent.

A deposit of 50% of rental cost and a \$100 date deposit is required to hold a date. Before and after the event, there will be a damage free inspection by DSU personnel. If damage is accumulated from the rental, I understand I will be billed and will be required to pay for all costs in repairing the damage. The remaining 50% of rental cost is due 30 days prior to the event. A late payment will result in an additional 10% late fee.

If cancellation is necessary, refunds are as follows:

1. A deposit may be transferred to another date without penalty if the change is made 90 days prior to the event.
2. Refund Policy-
  - Cancellation with less than 30 days' notice from event date = \$0 Refund of Date Deposit
  - Cancellation with more than 31 days' notice from event date = 50% Refund of Date Deposit

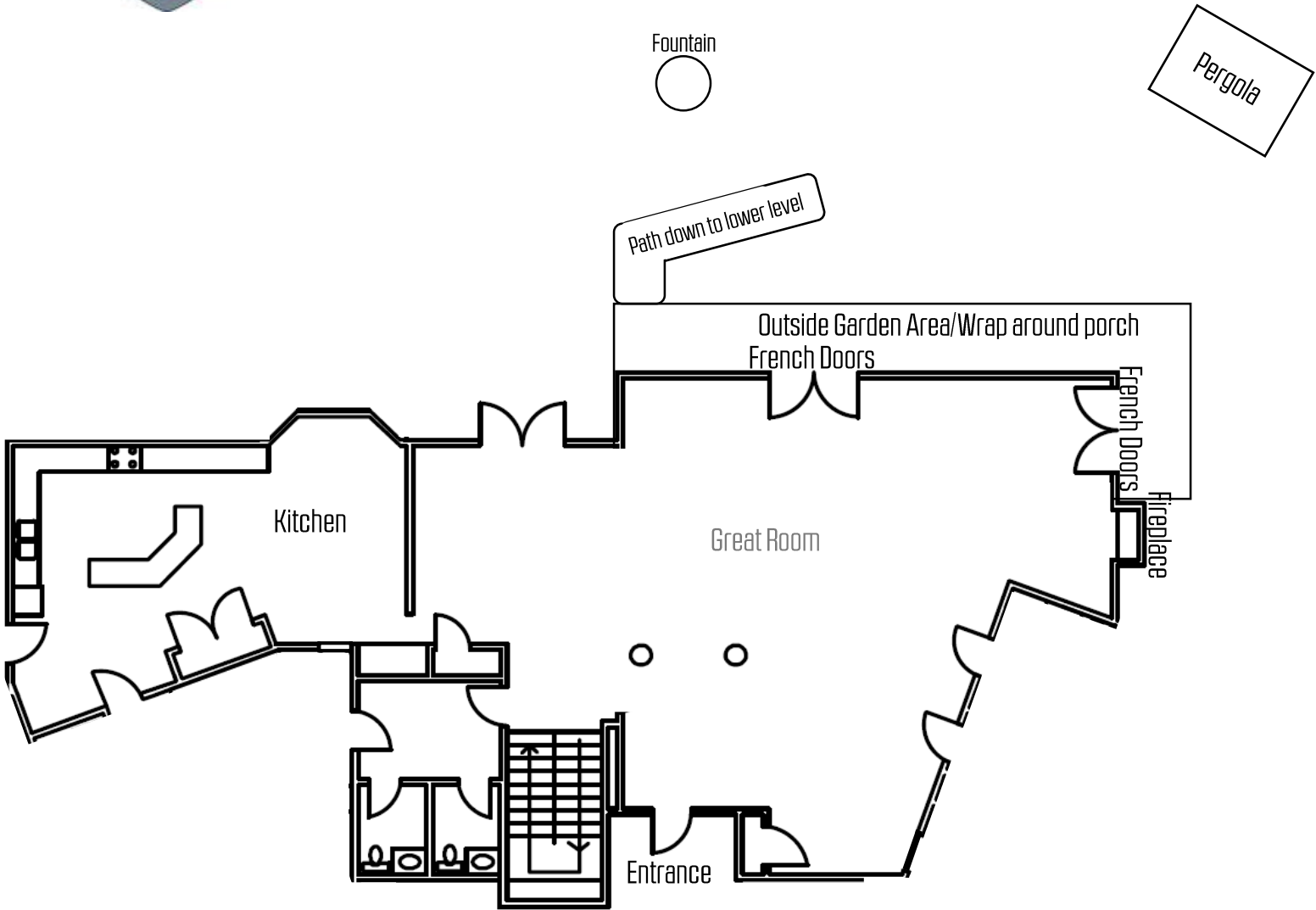
By signing below I agree to all of the conditions of the Use Policy and Contract as stated above:

**Renter Signature:** \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**DSU Alumni Office Signature:** \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



# Dixie State University Alumni House Event Center Event Outline



Name: \_\_\_\_\_

# of Round Tables: \_\_\_\_\_

Phone: \_\_\_\_\_

# of Buffet Tables: \_\_\_\_\_

Date: \_\_\_\_\_

# of Chairs: \_\_\_\_\_

Function: \_\_\_\_\_

# of Linens: \_\_\_\_\_

Time: \_\_\_\_\_

\_\_\_\_\_ Buffet \_\_\_\_\_ Round \_\_\_\_\_ Other

Number of People: \_\_\_\_\_

Color of Linens: \_\_\_\_\_