## **Baxter Visitor Center Rental Agreement**

| This Agreement made and entered on the   | day, of  | 20, by the   |
|--|--|--|
| City of Baxter and the Friends of the Depot Org  |  |  |
| Note: Only available for rent after the Baxter V   | isitor Center/Mus  | eum is closed  |
| to the public after 2 p.m.   |  |  |
| Rental of Room is \$100.00 for 3 hours (including City of Baxter, (P.O. Box 335, Baxter, TN 38544) Required is a Security Deposit of \$100.00 mad Baxter, TN 38544. This check is held until area in   | i). \$25.00 per hou<br>e out to the Frien  | ur for any additional hours.<br>ds of the Depot, P.O. Box 384,   |
| Rental Fee Payments are non-refundable, for  | any reason.  |  |
| Facilities rented to:  |  |  |
| Name   |  |  |
| Address  |  |  |
| Phone no.  |  |  |
| Type of Event  |  |  |
| Date of Event Time of Event  |  |  |
|  |  |  |
| Signature on this User Agreement constitutes a conditions outlined in the City of Baxter and the By signing this application, you agree to indem Baxter, its employees, and officials from and agreementies, demands, expenses, or judgement a use of the fund raising room. Should the User regulations, the User will forfeit the privilege or refund. The person executing this User Agreement on behalf of the User at the overall supervision of the event. | e Baxter Visitor Cenity, defend and he gainst any and all strick or in control of the fany future use of the nent represents the | enter Fund Raising Room Policy<br>old harmless the City of<br>suite claims, losses, injuries,<br>onnection with the requested<br>procedures, rules, or<br>f said facilities without any<br>nat he/she has the authority to |
| Signature  |  | Date   |
| Administrative Secretary/Officer   |  |  |
| Visitor Center Contact: Connie Gentry – 931-2  | 67-8877  |  |