THE COLUMNS
ADMINISTRATIVE OFFICE
1216 ELEVENTH AVENUE SUITE 218
ALTOONA PA 16601-3413

Phone: (814) 949-0888 Fax: (814) 941-3682

Web Site: columnsdowntown.com

## **Rental Agreement**

I agree to rent THE COLUMNS (main floor) for (type of eve	ent)
on (date) for a charge of	\$ and submit herewith one-half of the
rental charge in the amount of $\dots$ . The	rental charge includes the day preceding the event
between 9:00 a.m. and 2:00 p.m. for set-up and decor	ating purposes. The time of this event will be from
AM/PM until AM/PM. The antici	pated number of people attending this event is
approximately	
RENTER'S NAME	
ADDRESS	
PHONE NUMBER	CELL PHONE
SIGNATURE OF RENTING PARTY	DATE
Authorization is granted to THE COLUMNS to use ph web site or in other promotional materials ( ) YES	( ) NO.
CATERER'S NAME	
ADDRESS	
PHONE NUMBER	CELL PHONE
I have been provided with a written copy of liabilit personal injury, and agree to be responsible for all or	
SIGNATURE OF CATERER	DATE
** (If no approved caterer is used for the event, an Paragraph 13 under CATERER'S POLICY.)	additional \$250 security deposit is required. See
ACCEPTED FOR THE COLUMNS	DATF

## **DEPOSIT**

A 50% deposit is required to reserve the date and time of your event. Dates will only be held for two weeks after initial inquiry and/or viewing of The Columns. Deposit is required within the two week period to reserve date.

Any unpaid balance is to be paid in full sixty (60) days prior to the day of the event. The details of your event must be finalized at least ten (10) days prior to the date of your event.

Cancellations, in writing, sixty (60) days or more prior to your event allow for a refund of one-half of the deposit and any additional monies paid. Cancellations of less than sixty (60) days will result in forfeiture of the entire amount paid.