Event Date: ______________________________________ Event Title: ______________________________________________

Event Type: [] Reception  [] Ceremony  [] Banquet  [] Reunion  [] Lecture  [] Conference  [] Performance  [] Corporate Event  [] Dance

Contract Start Time (usually 4:00pm): ___________ Contract End Time (usually 10:30pm): ___________ Est. Attendance: ___________

Rentee Name: ____________________________________________________________________________________________

________________________________________________________________________________________________________

Address: (include apartment or building number if applicable)                 City                                   State                             Zip

(______)________________________     (_______)_________________________       __________________________________

Home Phone                                                   Cell Phone                                                            Email (SMA does not rent or exchange email addresses)

Bride’s/Groom’s name (if applicable)                                                      Bride’s/Groom’s name (if applicable)

_______________________________________________               (_______) __________________________________________

Secondary Contact Name                                                                          Cell Phone

By signing this contract, I understand and agree that myself and all guests, volunteers, and vendors involved with this event will abide by the parameters of this contract and the Facility Use Information & Policies. My deposit payment is enclosed.

___________________________________________________________              ______________________________________

Signature                                                                                                                               Date

For office use only AREA(S): [] Main Level  [] Stewart Sculpture Garden  [] Food Staging Area  [] Upper Level  [] Grand Gallery

[] East Gallery  [] Swanson Gallery  [] Underground Gallery

MAIN or UPPER LEVEL
Class II (Springville Resident Discount)
[] $300 refundable deposit
[] $1,400 for initial 6.5 hour block/weekday
[] $1,600 for initial 6.5 hour block/weekend
[] $150/hr. for additional hour(s) _____

Class III
[] $300 refundable deposit
[] $1,600 for initial 6.5 hour block/weekday
[] $1,800 for initial 6.5 hour block/weekend
[] $150/hr. for additional hour(s) _____

STEWART SCULPTURE GARDEN
Class II (Springville Resident Discount)
[] $300 refundable deposit
[] $1,300 for initial 6.5 hour block/weekday
[] $1,500 for initial 6.5 hour block/weekend
[] $150/hr. for additional hour(s) _____

Class III
[] $300 refundable deposit
[] $1,500 for initial 6.5 hour block/weekday
[] $1,700 for initial 6.5 hour block/weekend
[] $150/hr. for additional hour(s) _____

Additional Gallery
Class II (Springville Resident Discount)
[] $100 refundable deposit/gallery_____  
[] $150 for initial hour/gallery_____  
[] $75/hr. for additional hours/gallery____

Class III
[] $100 refundable deposit/gallery_____  
[] $175 for initial hour/gallery
[] $100 for additional hours/gallery

Additional Fees and Penalties:
[] $20 Food fee per additional gallery _____ galleries x $20=$_____  
[] $60 Specialty set-up or mid-event set-up change ____ set-ups (____ galleries) x $60=$_____  
[] $40 Use of upright or grand piano [select locations]_____
[] $100 late removal of equipment and/or décor_____
[] $200/hr. Time outside of contracted usage ____ hours=$_____  

Total Fees: $______________

Deposit ([] completed contract on file)
Date paid _______________________________ Amount paid: $300 []
Receipt # ________________ cc [] cash [] ck. # ________________

Facility Use Fee
Date due ___________________________ Date paid __________________
Amount $ _______________
Receipt # ________________

Facility Use Map(s)
Date due ___________________________ Date approved _______________

Refund
Date paid ___________________________ Amount $ _______________
Approved by _______________
Receipt: ___________________________