



# MEADOW CONFERENCE CENTER

## Rental Agreement

Rental agreement for space rental in the Meadow Conference Center (MCC) at Mountain Meadow Herbs (MMH) located at 1019 Hard Rock Road, in Somers, Montana, 59932.

Applicant/Organization Name	Contact Name	
Address	Phone Number	
City	State	ZIP
email address		

**Please indicate below the days and time frames that you need the space and circle how many hours each day.** (1 hour = \$75    2 hours = \$150    3 hours = \$225    full day = \$300)

**Day 1:** \_\_\_\_\_ 1 hr    2 hrs    3 hrs    full days (4 hrs +)    Day Total: \$ \_\_\_\_\_  
 Start time: \_\_\_\_\_ am/pm    End time: \_\_\_\_\_ am/pm

**Day 2:** \_\_\_\_\_ 1 hr    2 hrs    3 hrs    full days (4 hrs +)    Day Total: \$ \_\_\_\_\_  
 Start time: \_\_\_\_\_ am/pm    End time: \_\_\_\_\_ am/pm

**Day 3:** \_\_\_\_\_ 1 hr    2 hrs    3 hrs    full days (4 hrs +)    Day Total: \$ \_\_\_\_\_  
 Start time: \_\_\_\_\_ am/pm    End time: \_\_\_\_\_ am/pm

**Day 4:** \_\_\_\_\_ 1 hr    2 hrs    3 hrs    full days (4 hrs +)    Day Total: \$ \_\_\_\_\_  
 Start time: \_\_\_\_\_ am/pm    End time: \_\_\_\_\_ am/pm

**Day 5:** \_\_\_\_\_ 1 hr    2 hrs    3 hrs    full days (4 hrs +)    Day Total: \$ \_\_\_\_\_  
 Start time: \_\_\_\_\_ am/pm    End time: \_\_\_\_\_ am/pm

(If you need additional days, please attach another sheet indicating days and hours)

**Rental Total: \$ \_\_\_\_\_**

### Please check the boxes next to each amenity you will need

- |  |  |
|--|--|
| <input type="checkbox"/> *Audio/Visual (smart tv/surround sound/device connectivity)*<br><input type="checkbox"/> *Custom table/chair arrangement (to be discussed with sales rep)*<br><input type="checkbox"/> *4x6 white board | <input type="checkbox"/> Food/beverage service - to be discussed and charged separately with Cafe Manager<br><input type="checkbox"/> Other _____<br>(we will do our best to accommodate your needs) |
|--|--|

\*Indicates items included with rental fee

**PAYMENT:** Applicant/organization will pay a 50% deposit to hold the space. The balance will be due the day of the event.

**CANCELLATION POLICY:** A full refund will be given if reservation is canceled 2 weeks prior to event start date. After the two weeks, the 50% deposit is non-refundable.

Payment Information	
<input type="checkbox"/> Cash	<input type="checkbox"/> Check (Check # _____) <input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> Discover <input type="checkbox"/> AmEx
Credit Card Number: _____	Deposit amount: \$ _____
CVC: _____ Exp: _____	Balance due on event date: \$ _____
By filling in the credit card information, you agree to allow MMH to charge your card for the 50% deposit today, and the remaining 50% on the day of your event.	

Standard hours of operation are 8am - 5pm, Monday through Friday. Evening and weekend hours can be arranged with your MMH representative at no additional cost.

Client may show up early to set up the space as needed, please make arrangements to do so with your MMH representative.

MMH Staff will not serve, secure, or decorate unless otherwise stated specifically by MMH representative.

If specific arrangement of tables/chairs is required, please communicate layout with MMH representative prior to event.

All guests must stay in designated areas only.

Damage(s) to the Conference Center done by the client will be assessed and may be charged to the client, up to \$2500.

**By signing and dating below, you indicate that you agree to all of the terms of this agreement.**

\_\_\_\_\_  
Applicant Signature Date

**By signing and dating below, MMH indicates that the agreement is complete and the booking is official**

\_\_\_\_\_  
MMH Signature Date received by MMH