

# Sparks Heritage Museum, Inc.

820 Victorian Avenue  
Sparks, Nevada 89431  
(775) 355-1144

*"Preservation of Yesterday and Today for Tomorrow"*

## Facility Use Agreement

Facility User Name \_\_\_\_\_  
Organization \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Contact Name \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Event Date \_\_\_\_\_ Event Time \_\_\_\_\_ Time In \_\_\_\_\_  
(No More than 6 months in Advance) (Includes setup, event, Time Out \_\_\_\_\_  
and take down) Total # of Hours \_\_\_\_\_

Facility  Changing Gallery  Cultural Center (Upstairs)  
 Museum Complex

Event Description \_\_\_\_\_  
(Type of event and activities)

Estimated Attendance \_\_\_\_\_

Set Up Plan for Tables, Chairs, and Equipment \_\_\_\_\_  
(Attach floor plan if necessary)

Special Equipment \_\_\_\_\_  
(A-V equipment, podium, canopies, etc.)

Decorations and Signs \_\_\_\_\_

Food and Beverages \_\_\_\_\_

Alcohol Served  Alcohol Sold  
(Must provide copies of permits)

The Sparks Heritage Foundation and Museum, Inc. is a 501(c)(3) tax exempt non-profit organization founded by volunteers and continues to function without governmental funding. Your gift is deductible to the fullest extent allowed by law. The Sparks Heritage Foundation and Museum Inc.'s Federal Taxpayer I.D. Number is 94-3004776. The Sparks Heritage Museum is organized to prevent the loss of regional history for the education and enjoyment of present & future generations.

Name of Caterer \_\_\_\_\_  
Arrival Time \_\_\_\_\_ Departure Time \_\_\_\_\_

Number of Event Personal Provided by Facility User \_\_\_\_\_

Amount Due within 30 Days of Invoice, not less than 14 days prior to the event

Use Fee	\$ _____
Admission Fee	\$ _____
<small>(Adults \$5.00, Museum Members Free, 11 and under Free)</small>	
Refundable Cleaning Deposit	\$ _____
Estimated Total Amount Due	\$ _____
<small>(Invoice due within 30 days of receipt)</small>	

THE UNDERSIGNED AND ORGANIZATION APPLYING ACCEPTS FULL RESPONSIBILITY FOR THE TYPE OF ACTIVITY AND THE BEHAVIOUR OF THE PARTICIPANTS AT THE FACILITY, FOR ANY DAMAGES TO MUSEUM OR CITY OF SPARKS PROPERTY, CLEANING OF AREA/FACILITY, AND CARE OF EQUIPMENT AT THE ABOVE STATED DATES AND TIMES. ALSO, THE UNDERSIGNED SHALL BE HELD RESPONSIBLE FOR ANY LOSS, ACCIDENTS, INJURY, OR DAMAGE TO PERSONS OR PROPERTY, WHICH RESULT FROM FACILITY USE. THE UNDERSIGNED SHALL HOLD HARMLESS AND INDEMNIFY CITY OF SPARKS AND SPARKS HERITAGE MUSEUM IN EVERY WAY FROM CLAIMS, SUITS, AND ACTIONS AT LAW FOR DAMAGE OR INJURY TO PERSONS OR PROPERTY THAT MAY ARISE OR BE OCCASIONED IN ANY WAY BECAUSE OF THIS AGREEMENT.

I have read and understand the terms and conditions of use as outlined in this agreement and the Sparks Heritage Museum's Policy on Facility Use. I acknowledge and accept responsibility.

Facility User Representative

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

Print Name \_\_\_\_\_

Address of Representative \_\_\_\_\_

Sparks Heritage Museum Representative

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

Museum Contact: Anthea Humphreys - Executive Director  
Sparks Heritage Museum, 820 Victorian Avenue; Sparks, NV 89431  
Phone: 775/355-1144 Email: anthea@sparksmuseum.org