



Rochester Hills Museum at Van Hoosen Farm

1005 Van Hoosen Road, Rochester Hills, MI 48306

Phone 248.656.4663 fax 248.608.8198

rhmuseum@rochesterhills.org

www.rochesterhills.org

Outdoor Reception Contract

- 1. Our outdoor event fee is \$200 per hour. This includes one hour to set up, one hour to take down, 100 white garden chairs, restrooms, garbage collection, and use of our 1927 Dairy Barn for your guests to enjoy.
2. We require a \$200 deposit to reserve your outdoor event date and time, which is refundable up to 9 months before your event. There is a \$50 cancellation fee for returned deposits. An additional deposit is not necessary if we are hosting your wedding ceremony.
3. The remaining balance for the reception, payable by MONEY ORDER, CASHIER'S CHECK, CASH, VISA, MASTERCARD, or AMERICAN EXPRESS, is due one month before your event. Your deposit will be returned within 30 days after your event less any deductions made for damages, extra charges, violation of our alcohol policy or any other violation of this contract.
4. The Museum has two 20' x 30' white tents available for rent at \$250/tent. Advanced notice is required.
5. The Museum is open for public tours from 1:00 p.m.- 4:00 p.m. on Fridays and Saturdays.
6. All evening events must end by 9:00 p.m.
7. Due to the age and nature of the Museum buildings and grounds, we do not allow smoking, pets, food, or beverages inside any Museum buildings. Alcoholic beverages and smoking are prohibited on all City grounds.
8. Your caterer must be completely self-sufficient. No food, drinks, dishwashing, or the storage of supplies are permitted inside any Museum building.
9. Outdoor events are usually held along Stoney Creek on the Dairy Barn side of the property. The 1927 Van Hoosen Dairy Barn will be open for your guests during your event, however food and drink must remain outdoors.
10. Your caterer will have to provide insurance coverage identified under a separate agreement.

All of the above guidelines are subject to change due to special events and projects.

Requested Reception Date _____ Number of Guests _____
Time of Arrival _____ Time of Event: Start _____ End _____ Time of Departure _____
Name (Lessee) _____

Address _____ City _____ State _____ Zip _____
Home Phone () _____ Cell Phone () _____
Email Address _____
Caterer Name _____ Phone () _____

Address _____ City _____ State _____ Zip _____

How did you hear about our facility? _____
Special Instructions: _____

LESSEES, by their signatures, agree to hold the City of Rochester Hills safe and harmless from any loss or damage that may arise during the rental term or as a result of a LESSEES' special event. LESSEES also agree to pay for all damages and for excess time used in the course of their event. LESSEES understand that their party may be sharing the Museum's facilities with other programs and exhibits, and that alcoholic beverages are prohibited.

Lessee Signature _____ Date _____
Please make checks payable to: The City of Rochester Hills



Table with 2 columns: Fee/Deposit/Other fees, Total Fees, -Deposit Paid, Balance Due. Each row has a corresponding blank line for input.