



# Treaty Four Holding Corporation Facility Rental Contract

Please Make Cheque payable to: **TREATY FOUR LEASE REVENUE**  
 P.O. Box 155  
 Fort Qu'Appelle, Sask. S0G 1S0  
 Phone: (306) 332-2600 Fax: (306) 332-2985

Group/Function: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
 Date(s) required for function: \_\_\_\_\_ Phone # of Contact Person: \_\_\_\_\_  
 \_\_\_\_\_ Fax # of Contact Person: \_\_\_\_\_  
 Arrival Time: \_\_\_\_\_ Purchase Order #: \_\_\_\_\_  
 Departure Time: \_\_\_\_\_ Billing Address: \_\_\_\_\_  
 Number of People: \_\_\_\_\_  
 Coffee/Beverages Served:  Yes  No \_\_\_\_\_  
 Times: \_\_\_\_\_ AM \_\_\_\_\_ PM Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Rental Rates: (please check one)**

|                                   |                              |                        |
|-----------------------------------|------------------------------|------------------------|
| _____ Small Boardroom (Max. 10)   | Full Day: _____ \$ 75.00/Day |                        |
| _____ Large Boardroom (Max 15-25) | Full Day: _____ \$100.00/Day | ½ Day _____ \$65.00 ** |
| _____ Teepee (Max 200)            | Full Day: _____ \$125.00/Day | ½ Day _____ \$75.00 ** |
| _____ Archive Hall: (Max 200)     | Full Day: _____ \$125.00/Day | ½ Day _____ \$75.00 ** |
| _____ Open Conference (Max 200)   | Full Day: _____ \$125.00/Day | ½ Day _____ \$75.00 ** |

\*\* ½ days are from 9:00 am to 12 noon or 1:00 pm to 5:00 pm. Over lapping bookings constitute as a Full Day. Eg: 10:00 am - 3:00 pm will be charged as a Full Day.

**Additional Services:**

Photocopying: \_\_\_\_\_ @ .25/copy Slide Projector \_\_\_\_\_ Overhead: \_\_\_\_\_  
 Faxing: \_\_\_\_\_ @ \$2.00/1st page Flip Chart \_\_\_\_\_ TV/VCR: \_\_\_\_\_  
 \_\_\_\_\_ @ \$1.00/after Sound System \*\* (*Will be invoiced separately*) \_\_\_\_\_

**TERMS OF CONTRACT:**

1. I have read this rental contract and by signing below agree to the arrangements as stated in the guidelines.
2. I hereby certify that the above is a true statement of expense and that I am aware of the policies governing the use of the facilities.
3. I have and understand the current policies and procedures and am aware of how they affect this contract.
4. I understand that I am financially responsible to pay for 100% of the final guarantee and that there is a **2% interest change to all invoices not paid within 30 days**
5. I understand that I am responsible to give at least **three (3) working days advance notice of any cancellation.**
6. I understand that if I do not give 3 days notice of cancellation, charges will be applied.

**Approved for Payment:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

**Accepted by Treaty Four Holding Corporation:** \_\_\_\_\_

**\*\* FACILITY RENTALS INVOICED SEPARATELY FROM ANY CATERING/RESTAURANT ITEMS\*\***  
**\*\*\*Absolutely no outside foods or beverages allowed\*\***

*We reserve the right to change prices accordingly*