

APPLICATION FOR FACILITY USE
BROWN COUNTY HISTORICAL SOCIETY, INC.

Location: Brown County History Center, 90 E. Gould Street. Go one block north of the courthouse on Van Buren St., turn right on Gould St. Big building is on left. For upper level entry, go to Locust Lane, turn left, look for door to building on left. For lower level entry, continue on Locust Lane to Mound St., Take next left turn (Buck Stogsdill Way). History Center building is on left. Look for front door on big front porch. Greeter is at this entrance. 812 988 4852

(mail application and check to) - BROWN COUNTY HISTORICAL SOCIETY
P. O. Box 668, Nashville IN 47448 Office 812 988 2899, Event Coordinator 812 988 4852

Available rooms: Hamilton Grand Hall upstairs is 42 feet by 67 feet, 200 person capacity.
Hughes Hall on lower level. Capacity 50 people.

Individual/Organization: _____

Responsible person name and
Mailing Address: _____

Phone: _____

E-Mail: _____

Room/s needed _____

Date/s _____

Begin reserve time: _____

End Reserve Time: _____

Expected attendance:
Purpose of the activity: _____

I Office Use:

This agreement is entered into by and between the Brown County Historical Society (BCHS) and the undersigned User. The parties agree as follows:
A USER FEE and refundable Security (damage deposit) are due at the time this agreement is signed. A date is not reserved until the payment and signed contract are received. Upon reservation, you will receive a copy. The full damage deposit is refundable within 30 days after the event if no damage is assessed to the facility and all conditions of this agreement are met. The amount of any damages or costs, clean-up or otherwise, will be deducted from the damage deposit.

CANCELLATION POLICY: If any event is cancelled by the user up to 30 days in advance, 75% of the rental fee will be returned. The security deposit will be refunded in full. If less than 30 days notice, the security deposit only will be refunded.

I certify that I have read the Facility Use Policy and will observe guidelines for use of facility. I assume full responsibility for any damage to the facility and agree to pay for any damages.

Date _____ Signed by responsible person _____