

Friends of the Plymouth Historical Museum Night at the Museum Party Contract

Thank you for considering the Night at the Museum Party at the Plymouth Historical Museum (“PHM”). Please note that this event may not interfere with the normal public operation of the PHM and is subject to its policies and procedures. Please also note that the date of the event must be mutually agreed upon based on PHM availability.

Terms and Conditions

1. Set-up and clean-up of the Sanford Burr Meeting Room are the responsibility of the renter; please notify PHM at the time of rental if you require advance arrangements for setting up.
2. NO SMOKING ALLOWED on PHM premises.
3. Renting Party and guests are responsible for any damage that occurs to PHM property during the time of your scheduled function and in the area where your function is held.
4. PHM accepts no responsibility for accidents or injuries to visitors (see “Liability Waiver/Indemnification Agreement.”)
5. The Night at the Museum Party includes food and beverages for 10 children and a viewing of one of the *Night at the Museum* movies. Re-enactors will be available on the PHM Main Street to interact with the children. One person will receive the PHM version of the Tablet of Akhmenrah. Additional children can be added for \$30 per person. Food for any adults needs to be provided by renter.
6. Renting party must provide adult supervision during party (parent or other adult over the age of 21).

Fee (personal or business checks and credit cards accepted):

Night at the Museum: \$300 for up to 10 children; additional children are \$30 each
Deposit: One-half total fee due when Agreement signed
Final Payment: Due 1 week before Event

Cancellation Policy

In the event of cancellation, fee payment shall be refunded on the following basis:

7 Days’ Notice or More: Full Refund
Less than 7 Days’ Notice: Forfeiture of 10% of deposit.

Note: The application form and liability waiver/indemnification agreement must be signed, and all required payments made, the earlier of 30 days before the event or within two Museum business days of making the reservation.

Date of reservation _____

Name _____

Liability Waiver/Indemnification Agreement

I have received, read, understood, and agree to comply with the Friends of the Plymouth Historical Museum Night at the Museum Party Contract, including terms and conditions for rental use, the fee schedule and cancellation policy.

I hereby fully release and discharge the Friends of the Plymouth Historical Museum (a.k.a. Plymouth Historical Society), its directors, officers, agents and employees from any and all claims from injuries, including death, damage or loss, which may arise or that may be alleged to have arisen out of, or in connection with the contracted event at the Plymouth Historical Museum.

I further agree to indemnify and hold harmless and defend the Plymouth Historical Society, its directors, officers, agents and employees from any and all claims resulting from injuries, including death, damage or loss, including, but not limited to the general public, which may arise or may be alleged to have arisen out of, or in connection with the contracted event.

Renting Party

Print Name

Signature

Date: _____

Night at the Museum Party Application Form

Contact Name: _____

Address: _____

Phone (home/work/cell): _____

E-Mail: _____

Best time/method to contact: _____

Preferred Date: _____ Alternative Date(s): _____

Preferred Time: Party is generally held 5-8:30 pm. If a different time is requested, note it here:

From _____ .m to _____ .m

Estimated number of guests:

Adults: _____

Ages 10-18: _____

Under 10: _____

Is this a birthday party? Yes _____ No _____

If yes, name and age of the birthday boy/girl: _____

Which version of *Night at the Museum* do you want to watch?

Night at the Museum (first movie) _____

Night at the Museum: Battle of the Smithsonian _____

Night at the Museum: Secret of the Tomb _____

Food preferences

Pizza _____ Subs & Chips _____

Beverages: _____

Amount Received (½ of Fee \$150.00) \$ _____

Renting Party

Print Name

Date: _____

Signature

Friends of the Plymouth Historical Museum

Signature

Date: _____

Title