



TILLOTSON CENTER
 Community Heritage, Visual & Performing Arts
 14 Carriage Lane
 Colebrook, NH 03576

Rental Agreement

Organization or Individual Name - (Renter):

Event Date(s):

Contact Person:

Phone:

Address:

E-mail address:

Number of expected attendees:

Event Date(s):

Arrival time:

Event begins at:

Event ends at:

Use of space and equipment:

Rooms Available	Rooms Requesting	<i>Room capacity has been determined by the Town of Colebrook Fire Marshall (11/29/2021). *no combinations</i>
Gallery		(capacity 38 seated or 82 standing)
Concession Area		N/A
Conference Room		(capacity 14 seated; or 21 standing)
Lobby		(capacity 10 seated, or 22 standing)
Porch		(capacity 22 seated; or 48 Standing)
Deck		(capacity 31 seated; or 66 standing)
Kitchen		(the kitchen is a warming kitchen, no cooking is allowed)

Food or drink is not allowed on the Tillotson Center premises (land and building), without prior approval

Theatre: (capacity 130; and balcony 40)	Sound System: Lights:	Projector:	Spots
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Set-up Notes:

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Rental Rate:

- *4 Hour Usage Rate = \$200*
 - *additional \$75 for use of kitchen*
- *4 Hour Usage Rate = \$400*
 - *additional \$100 for sound/lights person*
- *Full Day Full Building = \$1000*

○ *Total:*

Insurance - Please mail your Certificate of Liability Insurance to the address mentioned below, or email it to tillotsoncenter@gmail.com. The use of any **pyrotechnic material is prohibited**. If you are unable to provide event insurance, please contact the Center. A quote for event insurance can be provided. The charge will be over and above the cost of the rental.

Publicity Material – To provide to TC Yes _____ No _____

If yes, please provide a **pdf picture** and any information you would like to appear on the TC website and Facebook page. Please send all advertising material to: tillotsoncenter@gmail.com

Rental payment / Deposit –

50% of the total amount is payable at time of the agreement signature, and is not refundable.

Balance due 24 hours before the day of the event.

Please return signed rental agreement with deposit to:

Tillotson Center, Inc. Attention: Executive Director, P.O. Box 51, Colebrook, NH 03576

Grand total Rental Fee:

Deposit paid: \$ _____ Chk.#: _____ Balance due: \$ _____

Renter Signature Printed name & title Date: _____

Executive Director Printed name & title Date: _____