

**CityPlace and The Rawlings Foundation**  
**Corporate/Non-Profit Event Contract Agreement**

**Agreement Statement:** Signature of this Contract Agreement acknowledges the acceptance of these terms and conditions on behalf of the Event Group, and that the Event Group is legally bound to this Contract Agreement and its Term and Conditions.

Event: Winter Formal ~ OCHS Event Date(s): January 20, Saturday, 2024 Time: 6pm-11pm

Event Coordinator: Amie Norton, Cheer Coach  
Address: 1150 North Highway 393  
La Grange, KY 40031  
Phone: (502) 553-3701 Cell: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: amie.norton@oldham.kyschools.us

Event Group: UCHS cheerleading team  
Address: \_\_\_\_\_  
Phone: (As Above) Cell: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: (As Above)

Yes ☐ No ☐ Copy of Event Group Liability Insurance Certificate is On File — will need updated  
Event Group Liability Insurance Certificate is due no less than 30 days prior to event. Due date: December 14, 2023  
Event Space: Pavilion 2 Full Day(s) 1 5 Hrs or Less \_\_\_\_\_

Corporate Rate includes the use and setup of CityPlace tables, chairs, black linens, tech, and housekeeping  
\* \_\_\_\_\_ % Discount if applicable

Rental based Up to \_\_\_\_\_ Attendees Includes: Up to 1 hour Event Assistance with Floor Plan, Event Timeline & A/V Test Tech

Facility Rental: \$ 1,000<sup>00</sup> + Extra \_\_\_\_\_ hrs. X \$150 per hr = \$ \_\_\_\_\_ \*Less \_\_\_\_\_ % = Total Rental: \$ 1,000<sup>00</sup>

25% of the Rental Fee is due on the date the contract is signed. Date signed & pd deposit: \_\_\_\_\_ \$ 250<sup>00</sup>

Balance due no less than 2 weeks prior to event date. \$ 750<sup>00</sup> Date due: 1/4/24 Date pd. \_\_\_\_\_ \$ \_\_\_\_\_

Fee for Additional Facility Rental hrs, Assistance w Floor Plan/Timeline, A/V Test Tech: \$150.00 X \_\_\_\_\_ hrs = \$ \_\_\_\_\_

\$500 Damage Deposit due no less than 2 wks prior to event date. Date due: \_\_\_\_\_ Date pd. \_\_\_\_\_ \$ \_\_\_\_\_

Method of Payment: Not required with COI

Check ☐ Check # \_\_\_\_\_ Credit/Debit: Master Card ☐ Visa ☐ AmExp ☐ Discover ☐ Date pd. \_\_\_\_\_ \$ \_\_\_\_\_

Check ☐ Check # \_\_\_\_\_ Credit/Debit: Master Card ☐ Visa ☐ AmExp ☐ Discover ☐ Date pd. \_\_\_\_\_ \$ \_\_\_\_\_

Check ☐ Check # \_\_\_\_\_ Credit/Debit: Master Card ☐ Visa ☐ AmExp ☐ Discover ☐ Date pd. \_\_\_\_\_ \$ \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Code on Back \_\_\_\_\_

Name as it appears on card \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

Billing address if different from above \_\_\_\_\_

I have provided copies of the CityPlace and The Rawlings Foundation Policies and Procedures with this Contract Agreement to my Event Group and my Event Group has agreed to abide by these terms.

Event Coordinator Signature: Jason Riff Date: 10.19.23

CityPlace-  
Administrator/Director: Cheryl Gurr Date: October 18, 2023

CityPlace a Project of The Rawlings Foundation 112 South 1<sup>st</sup> Avenue, La Grange, Kentucky 40031

Phone: 502-225-0870 E-mail: [info@cityplaceexpoctr.com](mailto:info@cityplaceexpoctr.com) Web: [www.cityplaceexpoctr.com](http://www.cityplaceexpoctr.com)

5/21/2019