AVENS – A Community for Seniors
Suite 1, 5710 – 50 Avenue
Yellowknife, NT X1A 1G1

Administration Boardroom

Rental Agreement Form

Name of Organization/Group/Client:		
Mailing Address:		
Postal Code:		
Main Contact Person:		
Main Contact Phone:		**Cell:**
Main Contact Email:		
Secondary Contact Person:		
Secondary Contact Phone:		
Secondary Email:		
Number of Persons using the Room:		
Date of Room Rental:		
Arrival Time:		**Departure Time:**
Daily Room Rental Rates	☐ **$300 For-Profit Organization** ☐ **$200 Not-for-Profit Organization** **Total Cost:_____ Payment Method:_____**	
Equipment Available	☐ **Coffee / tea station** ☐ **Small refrigerator** ☐ **Boardroom table (with 12 chairs)** ☐ **Whiteboards** ☐ **OWL technology system**	

We, as an organization/group/client will be oriented to the basic emergency evacuation procedure for the AVENS Administration Boardroom and agree to assist all people in our group in understanding the basic evacuation procedure. We understand that in the absence of a contact person, another person from our group will be designated to assist all members of our group, if an emergency evacuation is necessary.

Main contacts for all AVENS emergencies are:

- ✓ AVENS Reception (867) 920-2443 Ext. 100
- ✓ Tanya Doherty, Executive Assistant (867) 920-2443 Ext. 104
- ✓ Sara Fullerton, Chief Financial & Technology Officer (867) 920-2443 Ext. 102
- ✓ Steven Nicholas, Director of Operations (867) 445-5001

We further agree and understand that **no** residents of the AVENS facility shall attend our event in the Administration Boardroom unless prior written approval is arranged with AVENS Care team. We acknowledge and understand that AVENS will not be providing any staff members and will not have any responsibility to supervise or care for any residents while those residents are attending our function.

We also understand that AVENS will not be supervising the activities that take place in the AVENS Administration Boardroom during our event, and that we, not AVENS, are responsible for ensuring that those activities are conducted safely and that they do not pose a risk to the people who attend our event.

Responsibility:
I have read and understand the terms and conditions of this agreement, its conditions, and I understand our obligations as set out by AVENS and the use of their facility Rooms.

Signed:_____Date: _____

Signed by (Print): _____

Witness Signature:_____ Date:_____

Witnessed by (Print): _____

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Terms and Conditions for the Administration Boardroom (the "Room")

- The rental of the Rooms must be done through the Executive Office, 920-2443 ext. 100.
- NOTE: **NO ALCOHOL IS PERMITTED IN THE ROOM**

Set-up and clean-up of the groups using the Administration Boardroom

- Garbage will be placed neatly in garbage can.
- All furniture must be rearranged back to its original position.

Please note that we are only able to loan out these Rooms if they are kept in good order by those who use them. Be respectful of our spaces.

Should there be an accident/spill/mess, please call to let us know. You may leave a message for the Housekeeping Department at (867) 920-2443 Ext 132.

Cancellation Policy

- All reservations require at least 5 business days' notice of cancellations.
- The Client agrees to pay for any missing or damaged equipment, walls, furniture, AV equipment.
- The Client agrees to all terms and conditions.

I,_____agree to the above requirements/rates for the use of the Rooms and will complete the checklist ensuring all items are completed before leaving.

Signed:_____Date: _____

Signed by (Print): _____

Witness Signature:_____ Date:_____

Witnessed by (Print): _____