

PLEASE PRINT OR TYPE

RENTER / Co	ONTACT			TODAY'S DATE _		
Name:				Cell Phone:		
Company:				Work Phone:		
Address:				Email:		
City, State, Zip:				Check all that apply	☐ Museu	m Member
				☐ Non-Profit	☐ Comm	unity Organization
				☐ Business or LLC	☐ Family,	Friends Event
EVENT						
Description/Pu	rpose of Event:					
DATE:		Event Type/ch	eck all that app	ly		
		☐ Business	☐ Social ☐	Direct Sales *permission	required 🔲 Fund	draiser *permission required
Start Time inclu	uding set-up:			Guests: Priva	ate/By Invitation	☐ Open to the Public
End Time inclu	ding take-down/clean-ເ	ıp:		# of Guests: 🚨 Adu	lts □	Children
Request Tour o	of Museum for Guests I	Ouring Event:	☐ Yes, time:			l No
Renter will pro	vide: 🗖 COLD FOOD	☐ HEATED FO	OOD *no cooking	☐ BEVERAGES *	☐ CATERER ☐	LIVE ENTERTAINMENT
* Need peri	mission: Beverag	ges: For private ev	vents, wine and	beer service must be app	proved in advance a	nd meet local ordinances.
ask for d	etails No selling	g of alcoholic bev	erages allowed.	No red wine/juices/beve	erages allowed in M	useum because of staining.
ROOMS Chec						
	ent requires privacy or ours, it's important to no					
						nistoric rooms don't have
	the number of visitors					
	RENCE ROOM / Seats 1			☐ BUEHLER GALLERY		
☐ SUN ROOM / Museum has 30 folding chairs				☐ BRAZEAU GALLERY / Limited seating due to exhibits		
AMENITIES	Check all that apply					
☐ Chairs	Tables	5	☐ Podiur	n \Box	Electrical outlet	
□ Wi-fi	Projec				Kitchenette/no refrigeration or cooking	
☐ Other:	•		-			
MUSEUM	APRIL through LA			R DAY through MARCH		ounty Historical Museum
HOURS	Exhibits Tue Wed TI			s closed until April		isconsin Rapids WI 54494
HOOKS	Office Tue Wed Th	u 10am-4pm	Office Tue	Wed Thu 10am-3pm	∥ /15.423.158	30 swch-museum.com

SOUTH WOOD COUNTY HISTORICAL MUSEUM

organizations, businesses, in orm on a first come/first ser ble for rent before, during, a ter Museum hours; if Renter the rooms rented, common and guests agree not to use the for setting up the room and other items brought in meptacles. Museum staff will must be free standing. Materials. Affixing anything with nate and, e-cigarettes, tobacco, etced, and food may not be place type of heating equipment must be disclosed on the Room approved, Renter must provation and Museum as the vere to remain closed and not pushed to the sible for guests' respectful meallpaper, and not leaning on sooms does not constitute error announcements implying	equest Form. The following terms and individuals, and the public are availance basis. and after Museum hours at the discor's event is for a nonprofit organizar and public areas such as the restrocthe museum office, computers, phonomore, and at the conclusion before event, and at the conclusion bust be removed at the end of the restake down any folding chairs, table rials may not be affixed to walls, floories, tacks, staples, tape, poster putterials; confetti, glitter, birdseed; bulled, acced on exhibits or displays. If you we con the Room Rental Request and report and insured party, propped open during Renter's even puseum etiquette including but not a display cases. Children and service indorsement or approval of viewpoin such endorsements are prohibited.	om, and agreed-upon Museum floors and ones or other areas of the building. n, restoring it to the same condition as ental, the room cleared, and trash bagged is, and equipment provided by Museum. ors, ceilings, fixtures, furnishings, or other y, or glue, etc. is prohibited. bbles, diffusers, fog machines. Absolutely wish to serve hot pre-cooked food, Renter eceive permission from Museum. It upon advance approval from Museum. 1,000,000 naming South Wood County t. limited to not touching objects, art, animals must be supervised at all times. nts expressed by Renters and guests.
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or announcements implying	such endorsements are prohibited.	
		e facility cannot be occupied due to sever
•		y damage beyond the Museum's control. onsibility of Renter. Museum reserves the
nd control all functions held	on the premises. If management d	leems anything inappropriate, it has the
	y be stopped or the event be terming brought onto Museum property	nated. / by Renter and guests. It is understood
n no way responsible for any	y personal injuries, death, property	damage, or other liabilities that may be
he use of its facility. Renter a	agrees to release indemnity and ho	ld Museum harmless of any such
	nd conditions set forth in this Rooi	m Rental Agreement and
	Signature	Date
tative Name (print)	Signature	Date
	After LARGE DAY through MARCH	South Wood County Historical Museum
PRII through I AROR DAY	Exhibits closed until April	540 3rd St S Wisconsin Rapids WI 54494 715.423.1580 swch-museum.com
1	·	After LABOR DAY through MARCH

INTERNAL USE: ☐ Fee paid Date_____| \$_____| Ck #_____| room rental request and agreement 5-28-24