



3215 EAGLECREST DR. NE  
GRAND RAPIDS, MI  
49525-7005  
Ph: 616.456.5664 Fx: 616.456.5692  
1.888.456.5664  
www.aawm.org

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Thank you for your interest in renting a conference room from Area Agency on Aging of Western Michigan (AAAWM). To best serve your needs, please read this rental policy, complete the enclosed documents and submit the documents and deposit attention to the Office Manager.

Final payment is due on the date of the event. Currently AAWM accepts checks (preferred method of payment) or credit card payment (with a \$5 transaction fee added per use).

## **EVENT POLICIES**

When planning an event at Area Agency on Aging of Western Michigan (AAAWM), please schedule all appointments through the Office Manager at 616.222.7013.

Final room set up, a/v and itinerary must be confirmed 10-days prior to the event.

AAAWM reserves the right to change the meeting space as needed to maximize facility usage. Rooms are assigned based on the number of guests anticipated and in accordance with other needs of the agency.

A deposit is required per room/per day to reserve the room. The deposit is half of the rental fee. A written cancellation is required 30-days before the event to receive a refund. The balance of the room charge is due the day of the event and no refund will be given for less than 30-days' notice of cancellation however the deposit may be transferred to the room rental fee of a future date, dependent upon availability.

### **FOOD AND BEVERAGE**

Coffee and water service can be provided for a fee of \$25. Food and beverage will be served from the catering kitchen when utilizing Conference Room(s) A/B.

Groups are responsible for all coordination with caterers.

Snacks and refreshments may be brought in (at the renter's expense with approval of the AAWM Office Manager and agreement at time of room rental). Renter will be responsible for all paper products and serving needs of food/beverages, clean-up of products and room prior to departure.



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## **AUDIO VISUAL (A/V) NEEDS**

The use of any A/V equipment owned by AAAWM must be agreed upon prior to your event-see Facility Rental Agreement for individual fees.

Testing of equipment the group owns or rented through AAAWM can be done prior to the rental date and scheduled in advance with the Office Manager.

## **DECORATIONS**

Confetti or glitter is not allowed. Decorations may not be taped, pinned, thumbtacked or in any way adhered to the walls, ceilings, floors, or furnishings. All decorations or displays must be free standing.

Signage placed around the facility promoting events held on the premises must be approved by the Office Manager.

No candles, fireworks or alcohol are allowed.

## **LIABILITY**

Renter will be responsible for theft or damage to AAAWM premises and its property as a result of the event.

The renter is responsible for the proper conduct of its guests.

The renter is required to show proof of liability insurance.

The renter will not hold AAAWM or any of its employees responsible for the failure to execute an event due to occurrences beyond their control, such as, but not limited to, acts of God, public emergency, or threats to the community.

The renter will be required to sign a hold harmless agreement in which the renter assumes the risk of injury to all persons who are on AAAWM property as part of their group, and for injury or property damage sustained by others that results from the group's use of the premises.



*The Source for Seniors*

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## **PAYMENT**

Payment via Check (preferred method of payment) can be sent to:

**Area Agency on Aging of Western Michigan (AAAWM)  
3215 Eaglecrest Drive NE, Grand Rapids, MI 49525  
Attention: Office Manager**

Credit card payment is accepted through our website (AAAWM.org) using PayPal. A \$5 processing fee is added for each credit card transaction.

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**I have read the above policies and agree to its terms and conditions, as well as any other contract addendum which I may sign.**

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**Rental Group Representative**

**Date**

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**AAAWM Office Manager**

**Date**



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## HOLD HARMLESS AND INDEMNIFICATION AGREEMENT

In consideration of the privilege of using the Area Agency on Aging of Western Michigan's conference room located at 3215 Eaglecrest Drive NE – Grand Rapids MI, 49525 by \_\_\_\_\_ (*Name of Organization*) we agree to assume the risk of injuries, including death, that may be sustained by members of our organization or any person invited as part of our group in connection with the use of said premises.

Further, we agree to indemnify, save and hold harmless AAAWM against any and all expense and liability of any kind which we may sustain, incur or be required to pay, arising out of this agreement. Provided, however, that these provisions shall not apply to liabilities or expenses caused by or resulting from the willful or negligent acts or omissions of AAAWM or any of its officers or employees. In the event that we become involved in or are threatened with litigation, then we will immediately notify AAAWM. AAAWM may enter into litigation to protect the interests of AAAWM.

I hereby certify that I have the authority to sign this agreement for the organization identified above.

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Signature



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## Terms

- Room availability is Monday-Friday 8am-5pm.
- Rooms are reserved by the ½ day. Either 8am-Noon or 1pm-5pm unless other arrangements have been made.
- All individuals and/or agencies must complete a Facility Rental Agreement.
- Completing an agreement does not guarantee room availability.
- A 50% deposit is required to book the room and the 50% balance is due the day of the event.
- Cancellations are required 30-days in advance for a deposit refund. Cancellations made within the 30-days will move the deposit amount to 'hold' for a later scheduled event.
- Tables and chairs will be set up to your specifications by AAWM Staff.
- A one-time coffee and/or water service are available for a fee of \$25.
- Outside snacks and beverages are allowed.
- The group must provide plates, napkins and plasticware for food.
- Renter is responsible for any damage to facility and/or contents of fixtures. All damages must be reported to the Office Manager immediately.
- Renter is responsible for returning the room(s) utilized to the same condition prior to the Renter(s) use of the venue. If this condition is not met, a Room Clean-up Fee of \$200.00 or the actual cost of cleaning will be charged. Individuals/agencies holding the events assume responsibility for any damage to rooms, contents, and any equipment.
- Renters understand that nothing shall be attached to the walls, ceiling, or any of the fixtures.
- AAWM is in no way responsible for any personal injuries, property damages or other liabilities that may be incurred during use of their facility. Renter agrees to release indemnity and hold AAWM harmless of any such damage.
- AAWM is a drug, alcohol, vape and tobacco free facility.

### ROOM RENTAL RATES

ROOM	CAPACITY	½ DAY RATE
Conference Room C, D, or E (Upper Level)	12	\$100
Conference Room A (North conference room with projection screen - directly off lower-level lobby)	25	\$150
Conference Room B (South windowed conference room)	25	\$150
<b>Both Conference Room A &amp; B</b>	90	\$250



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## Facility Rental Agreement

<b>Group Name:</b>							
<b>Organization Address:</b>							
<b>City:</b>							
<b>Main Contact Name:</b>		<b>MI</b>	<b>Zip:</b>		<b>Main Phone:</b>		
<b>Alternative Contact:</b>					<b>Phone:</b>	<b>Email:</b>	

## Event information

<b>Date Requested:</b>		<b># of People:</b>		<b>Start time:</b>		AM <input type="checkbox"/>	<b>End Time:</b>		AM <input type="checkbox"/>
						PM <input type="checkbox"/>			PM <input type="checkbox"/>
<b>Room Requested:</b>				<b>Room Rate:</b>		<b>Fee</b>	\$		
<b>Additional Costs:</b>	<input type="checkbox"/> Room Fee Waived (CEO approval needed) <b>AAAWM USE ONLY</b>				<b>Fee</b>	\$			
<input type="checkbox"/> Projector Rental (\$40)	<input type="checkbox"/> Microphone Rental (\$10)	<input type="checkbox"/> Podium Rental (\$10)	<input type="checkbox"/> White Board (\$10)	<b>Fee</b>	\$				
<input type="checkbox"/> Easel (\$5)	<input type="checkbox"/> Screen (No Charge)	<input type="checkbox"/> Credit card processing fee (\$5 per transaction-coordinate w/ Office Manager)			<b>Fee</b>	\$			
<input type="checkbox"/> Water Tower and/or One-Time Coffee Service (\$25)				<b>Fee</b>	\$				
Less 50% Deposit Payable after room is confirmed					<b>Fee</b>	\$			
Balance owed day of event					<b>Total</b>	\$			

## Food/Beverage Information

<input type="checkbox"/>	We will be bringing in our own beverages
<input type="checkbox"/>	We will be providing and serving snacks/food
<input type="checkbox"/>	We acknowledge that we must provide all plates, napkins, plastic ware, etc.
<input type="checkbox"/>	Our caterer of choice is:
<input type="checkbox"/>	Other (special) requests:

<b>Printed Name:</b>	<b>Authorized Signature:</b>
(Printed name of authorized agency signature)	
<b>Name:</b>	<b>Responsible Person(s) contact number:</b>
(Printed Name of person(s) who will be on site at AAAWM and responsible for meeting setup/cleanup)	

<b>AAAWM USE ONLY</b>			
ROOM RATE WAIVED: (CEO APPROVAL)	DATE		
ROOM RATE \$	DATE ENTERED	BY	
TYPE OF PAYMENT	<input type="radio"/> CASH <input type="radio"/> CHECK <input type="radio"/> CREDIT CARD + \$5	AMOUNT OF DEPOSIT \$	
ACCOUNT BALANCE \$	BALANCE DUE \$	RECEIVED DATE	AMOUNT \$