



Countryside Community Center Rental Agreement

9 Sheldon Guile Blvd., Owego, New York 13827 • 607-687-4222

Welcome! Thank you for choosing Tioga Opportunities, Inc.'s Countryside Community Center for your upcoming event. To secure your reservation, please complete this form, provide a copy of your certificate of insurance, and mail to Tioga Opportunities, Inc., PR Coordinator, 9 Sheldon Guile Blvd., Owego, NY 13827, or email to info@tiogaopp.org. Rental and security deposit fees must be paid in full at the time of the reservation.

Rental Fees and Information:

| Room | Dining Room | | Conference Room | | Dining Room and Kitchen |
|--------------------------------|-------------|------------|-----------------|------------|-------------------------|
| | Fee | Non-Profit | Fee | Non-Profit | Fee |
| Flat rate for up to 4 hours | \$200 | \$160 | \$25 | \$20 | \$300 |
| Hourly fee per additional hour | \$50 | \$50 | \$25 | \$20 | \$50 |
| Room capacity as of 3/25/21 | 50 | | 6 | | |

A security deposit of \$200 is required as a part of the agreement and will be refunded 2-5 business days after the rental takes place, provided that the room is left in its original condition, and there has been no damage to the facility or contents.

Those renting the facility must provide a Certificate of Insurance listing Tioga Opportunities, Inc. (TOI) as the Certificate Holder for a minimum of \$500,000, unless this condition has been waived in the Rental Agreement.

Tioga Opportunities, Inc. requires that events serving food be catered by a licensed caterer.

Contact Information:

Contact Person: _____ Name of Group if applicable: _____

Address: _____

Email Address: _____ Phone Number: _____

Please tell us about your event:

Purpose of Use: _____

Number of Attendees: _____ Requested Room(s): _____

Requested Date: _____ Requested Time: _____ AM/PM to _____ AM/PM

Name of Licensed Caterer: _____ Phone Number: _____

Payment Method: Please circle one: Cash - Check- Credit Card Rental Fee Total: \$ _____

Credit Cards Accepted-Visa, MasterCard, Discover, and American Express. Checks may be made payable to Tioga Opportunities, Inc.

Agreement:

I, the undersigned, agree to follow all rules. I agree to replace or repair any property lost or damaged by our use. I agree to defend, indemnify, and hold harmless Tioga Opportunities, Inc. from and against any personal injury or property damage, which may result from the use of these facilities. I will not hold Tioga Opportunities, Inc. responsible for any scheduling errors or omissions.

Contact/Responsible Party Signature: _____ Date: _____

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| For Internal Use: Payment and Agreement Documents Received: _____ Reservation Confirmed: _____ Date: _____ TOI Staff Signature: _____ |
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