

THE STATION ON MERCER

Event Rental Application

Your event must be at least 90 days from the day you submit the application in order for it to be processed. All information on the application must be completed.

Event venue area(s) preferred: The Station (inside only)
 The Station Backyard (outside only)
 The Station (inside and outside)

**Contact Us For A
Fee Schedule**

Primary event contact: _____

Primary event contact e-mail address: _____

Primary contact mailing address: _____

Primary contact phone number: _____ Cell: _____

Name of event: _____

Organization(s) sponsoring/putting on event: _____

Event Web site: _____

Event date requested:

1st Choice _____ 2nd Choice _____ 3rd Choice _____

Event Start Time: _____ Event End _____

Will you need to set up the day before your event? Yes No

(Note: Additional fees apply for use of the venue the day before your event.)

Will you need to break down the day after your event? Yes No

(Note: Additional fees apply for use of the venue the day after your event.)

Secondary event contact name: _____

(Note: You must provide a primary and secondary event contact for your event.)

Secondary event contact e-mail address: _____

Secondary contact mailing address: _____

Secondary contact phone number: _____ Cell: _____

Projected event attendance: _____

Will you? Sell alcohol Give alcohol away No alcohol involved

Will you sell merchandise? Yes No

Will you be working with a caterer? Yes No

If "yes", please list the vendor name and contact info: _____

Will you have airborne objects at your event? Yes No

Will you have amplified music at your event? Yes No

Have you ever been convicted of a crime? Yes No

If yes, please explain...

Description of event: _____

Parking and traffic plan: _____

First time event applicants will need to provide three references that will be contacted in order to process your application.

Name	Relationship	Years Known	Cell / Phone	Email
------	--------------	-------------	--------------	-------

INSURANCE INFORMATION

Insurance carrier: _____

Insurance representative's name: _____

Address: _____

Phone number: _____ Fax: _____

Insurance contact e-mail address: _____

Please submit a deposit of \$250 via check or money order with the application for processing and mail to the address below. If approved, the deposit will be applied to the rental fee. If not approved it will be returned.

310 Mercer, LLC
Attention: Scott Daves
PO Box 214
Driftwood, TX 78619

TERMINATION

310 Mercer, LLC may terminate this agreement immediately upon serving written notice to the Sponsor/Organization if there is default by the Sponsor/Organization under any provision of the agreement, and the Sponsor/Organization shall have failed to completely resolve the default within five days after being given notice by 310 Mercer, LLC. If notice is served less than six days prior to the event, the Agreement will terminate prior to the rental period, unless the default is completely resolved prior to the rental period.

The Sponsor/Organization agrees to indemnify, save and hold harmless the estate of Frank D. & Clara Best, 310 Mercer, LLC, including their employees, agents and volunteers, from and against any and all costs, losses, diminutions in value, damages, liabilities, or expenses, without duplication, including, without limitation, reasonable attorneys' fees and all amounts paid for investigation, defense or settlement of any of the foregoing to the extent such costs, losses, diminutions in value, damages, liabilities or expenses are arising out of or resulting from Sponsor/Organization's actions or the event put on by the Sponsor/Organization. All revisions, changes, additions to any terms of this agreement must be in writing and approved in writing and dated by all parties. The signature below indicates that the sponsor/organization has reviewed and agrees to the conditions and restrictions in this agreement. I/We certify that all information given is correct and I hereby grant permission to 310 Mercer, LLC to conduct a criminal background check. 310 Mercer, LLC reserves the right to cancel any event if application information is found to be false.

Primary event contact signature

Date

Primary contact date of birth (MM/DD/YYYY)

Social Security Number

Secondary event contact signature

Date

Secondary contact date of birth (MM/DD/YYYY)

Social Security Number

For Purposes of conducting Criminal Back Ground Check at Management's Discretion.

REMINDER

Please complete all information requested. Your application will not be considered if incomplete and/or fee is not submitted. Thank you. You will be contacted within seven to ten business days of receiving your rental application.