



Conference Room Rental Agreement

Date: _____

Chamber Member Rental Information

Name/Business: _____

Phone: _____

Email: _____

Date of Use: _____

Rental Type (check one):

Half-Day (8 AM - Noon) – \$50

Half-Day (Noon – 4 PM) – \$50

Full-Day (8 AM – 4 PM) – \$75

(Tables, chairs, Wi-Fi, and projector are available)

Payment

- Payment is due prior to or on the day of the reservation.
- Accepted forms of payment: **cash, check, or credit card** (4% service fee applied)
- Checks should be made payable to **Shawano Chamber Foundation**.

Room Use

The conference room is available for meetings and business-related use. Please be respectful of the space and others in the building. Return furniture to its original setup and dispose of trash.

Questions/Cancellations

If you have any questions, please contact the Chamber office at (715-524-2139). Please notify the Chamber in advance if you need to cancel.

Signatures

Renter: _____ **Date** _____

Chamber Representative: _____ **Date:** _____