

**YOU ARE RESPONSIBLE FOR THE TERMS OF THIS CONTRACT  
PLEASE READ CAREFULLY**

**Application for Use of Alumni House**

**Independent Association of Framingham State Alumni  
42 Adams Road  
Framingham, MA 01702-2456  
508.872.9770  
Office@AlumniHouse.org**

*The Independent Association of Framingham State Alumni (IAFSA) is a private, non-profit organization that owns and operates the Alumni House. Its House Committee is comprised of volunteers who generously donate their time to make the House available to Alumni, College, and Community groups. We, therefore, request your cooperation so that IAFSA can continue to offer Alumni House for your use.*

**ALUMNI and COMMUNITY GROUPS**

Please detach this page to keep for your information. **Please return page 2** to the office at Alumni House at your earliest convenience, **at least one week prior to the date of the event.**

We, the undersigned, agree to the following conditions for special use of any of the facilities of the Alumni House.

1. We understand that contracting for use of the Alumni House for meetings and receptions is open to members of the community for approved functions. Students may only use the House for meetings and faculty-sponsored events.
2. We accept full responsibility for damage to the House and loss of or damage to its furnishings. Cost will be paid promptly by the organization and/or individual responsible.
3. We agree that the person signing below will be responsible for the set-up and clean-up of the facilities used. **The House must be left in the condition in which it was found, be vacuumed, and have all trash removed from the premises.**
4. We understand that there is a **fee of \_\_\_\_\_** for using the facility. In addition, a **surety fee of \_\_\_\_\_** will be required with the receipt of the contract **at least one week prior to the date of the event** toward a custodial fee. If the House is left in satisfactory condition, the surety fee will be refunded to the signer. Please make checks payable to:

*Independent Association of Framingham State Alumni*

5. We agree to secure the approval of the Executive Director and/or the House Chair for any catering service employed for our event.
6. We understand that this is a smoke-free facility.
7. We understand that if **alcoholic beverages** are to be served, it is the responsibility of the undersigned to ensure that they **will not be served to minors** and that they **will not be served to any individual who is intoxicated.**
8. We agree to reimburse the Independent Association of Framingham State Alumni (IAFSA) for any damage, direct or indirect, that it may suffer as a result of a violation of any of the preceding terms and conditions and we agree to release IAFSA from any and all liability for any actions taken by any individual who is present at the Alumni House and from any liability which the IAFSA may incur as a result of a violation of any of the preceding terms and conditions.
9. We understand that a member of the Alumni House Committee will let us into the building and that it is important to arrive at the time designated on the Contract as *Time to open House.*
10. We will immediately survey the condition of the House and tell the Committee member if there is any damage to the building prior to our event for which we do not take responsibility.
11. We agree to vacate the House no later than 11 p.m.

# CONTRACT FOR USE OF ALUMNI HOUSE

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

Organization \_\_\_\_\_ Type of Event \_\_\_\_\_

Date \_\_\_\_\_ Time of Event \_\_\_\_\_ Time to open House \_\_\_\_\_

Rooms Requested (please check):

- Conference Room       Living Room       Dining Room  
 Kitchen       Sunporch

Approximate number expected \_\_\_\_\_ Will refreshments be served? \_\_\_\_\_

Name of Caterer \_\_\_\_\_

Comments \_\_\_\_\_

I understand that if alcoholic beverages are to be served, it is the responsibility of the undersigned to ensure that they will not be served to minors and that they will not be served to any individual who is intoxicated.

I agree to reimburse the Independent Association of Framingham State Alumni (IAFSA) for any damage, direct or indirect, that it may suffer as a result of a violation of any of the preceding terms and conditions and I agree to release IAFSA from any and all liability for any actions taken by any individual who is present at the Alumni House and from any liability that IAFSA may incur as a result of a violation of any of the preceding terms and conditions.

I agree to return Alumni House to the condition it was in prior to the event, including vacuuming and removing all trash from the premises.

**I agree to the conditions as stated on page 1 and shall be responsible for the meeting arrangements as noted.**

SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_

## Office Use Only:

Received at office by \_\_\_\_\_

Date received \_\_\_\_\_ Surety Fee received \_\_\_\_\_

Donation received \_\_\_\_\_