



wmvsaddleclub@gmail.com / <http://www.wmvsc.com>

**2018 WET MOUNTAIN VALLEY SADDLE CLUB
LEASE AGREEMENT FOR BUILDING AND/OR ARENA**

NAME OF ORGANIZATION _____

CONTACT PERSON _____ PHONE _____

ADDRESS _____

TYPE OF ACTIVITY _____

DATE/HOURS OF FACILITY REQUESTED _____

___ \$100.00 Damage/Cleaning Deposit required for building lease only

___ \$50.00 Heating Surcharge for rentals scheduled Oct 1st-April 30th

___ \$25.00 Hourly rental rate

___ \$300.00 Rental, 12 hours or more

___ \$50.00 Hourly Business Rate

___ \$500.00 Business Rental per day **PROOF OF LIABILITY INSURANCE REQUIRED**

___ \$250.00 Rental rate for Arena per day **PROOF OF LIABILITY INSURANCE REQUIRED**

___ \$300.00 Rental rate for Arena and Building per day **PROOF OF LIABILITY INSURANCE REQUIRED**

___ **TOTAL DUE FOR RENTAL FEES AND DEPOSIT**

_____ Total deposits return date - Saddle Club initial _____

The Wet Mountain Valley Saddle Club will not be liable for injuries or accidents which occur during the above activities. No alcoholic beverages will be sold on the premises without the above listed organization showing proof of appropriate permit or license and/or proof of insurance.

Organization Representative signature Date

Saddle Club Representative signature Date

Please mail form to: Wet Mountain Valley Saddle Club, PO Box 501, Westcliffe, CO 81252
If you have any questions, please contact Dorothy Nepa 719-783-0513 goldenbreeze2@yahoo.com