



Screening Services Group
8670 Wilshire Blvd, Suite 112
Beverly Hills, CA 90211
Cell: (310) 701-8925
Phone: (310) 659-3875
Cell: (213) 926-5726
Fax: (310) 861-9005
adam@studioscreenings.com
michael@studioscreenings.com
www.StudioScreenings.com

Fine Arts Theatre - RECEPTION RENTAL AGREEMENT

Date and time of event: Date ____/____/____ Time ____:____

This Rental Agreement is entered into as of the above date by and between Screening Services Group, LLC (DBA Fine Arts Theatre) and

_____. Individual Name, or Business Name

This Agreement shall include and be subject to the following terms and conditions:

- 1. Rental time begins as soon as anything is brought into the building and ends when everything has been removed. Materials cannot be brought into the building until the rental time begins.
2. No time is guaranteed for early arrival of guests before the Booked time begins.
3. No walkways or exits may be blocked in any way. Nothing may be stored or staged outside the building.
4. Nothing may be staged in the building as to create a hazard.
5. No tape may be applied to any surface in the building.
6. Containers of ice must be insulated to keep surface water from floors and walls.
7. Trash removal will be the responsibility of renting party. Dumpster is by the Kabob House next door.
8. No confetti, glitter, gum, or candies with powdered sugar allowed.
9. A cleaning fee will apply if the space is not left in the same condition that it was upon arrival.
10. No alcohol may be served without the required insurance on hand.

Insurance requirements:

Coverage: \$1,000,000.00 & \$2,000,000.00
Additionally insured: Michael S. Hall, Screening Services Group, LLC 8670 Wilshire Blvd, Suite 112, Beverly Hills, CA 90211
DBA: Fine Arts Theatre, 8556 Wilshire Blvd, Beverly Hills, CA 90211
To serve alcohol: Required to state: Host Liquor Liability

WILL ALCOHOL BE SERVED? Check One: YES ____ NO ____

If YES, I agree I will be providing insurance as stated above (Insurance certificate must be provided to SSG before event can begin)

By signing you are stating that you agree to the above terms and conditions.

X _____ Authorized Representative

_____ Please Type or Print Name