



Screening Services Group
8670 Wilshire Blvd, Suite 112
Beverly Hills, CA 90211
Cell: (310) 701-8925 (Press 2)
Phone: (310) 659-3875
Fax: (310) 861-9005

michael@studioscreenings.com
joe@studioscreenings.com
max@studioscreenings.com

www.StudioScreenings.com

Wilshire Screening Room and/or QC Room at 8670 Wilshire –
EVENT / RECEPTION / RED CARPET – STEP & REPEAT 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 Wilshire Screening Room and/or QC Room at 8670 Wilshire) and

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.
2. Use of the loading dock requires prior approval by SSG and the building management, and may require additional insurance.
3. No time is guaranteed for early arrival of guests before the scheduled time in the screening room.
4. No walkways or exits may be blocked in any way.
5. No tape may be applied to any surface in the screening room or hallway.
6. Containers of ice must be insulated to keep surface water from floors and walls.
7. Trash can and trash bags will not be provided.
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 to serve alcohol:

To serve alcohol at the Wilshire Screening Room and/or QC Room at 8670 Wilshire:

Required to state:
Host Liquor Liability

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: Wilshire Screening Room and/or QC Room at 8670 Wilshire
8670 Wilshire Blvd
Beverly Hills, CA 90211

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. Authorized Representative:

Sign _____

Print Name _____