

Event Intake Contract

Congregation Beth Israel Ner Tamid
6880 N Green Bay Ave, Glendale, WI 53209
Phone: 414-352-7310

Applicant Name: _____

Name/s of event participant/s _____

Address: _____

Email/s: _____

Home Phone: _____ **Cell Phone:** _____ **Work Phone:** _____

Date of Event: _____ **Start Time:** _____ **End Time:** _____ **Set Up Time:** _____

Type of Event:

Bar / Bat Mitzvah Brit Milah/Baby Naming Wedding Funeral Meal of Consolation / Shiva

Luncheon / Dinner / Enhanced Kiddush / Oneg Lecture / Class Evening Party / Concert

Other _____ **Timeline:** _____

Number of people expected for event: Adults _____ **Children** _____ **Total** _____

Areas to be used:

Sanctuary Social Hall Kitchen Chapel Library

Promenade Classroom Bride's Room Outdoor Area Parking Lot

CBINT Equipment to be used:

Tables: 60" rounds # _____ 8 ft. # _____ 5 ft. # _____ Card # _____ Gift table (size) _____

Chairs # _____ High Chairs # _____ Wheelchair Accessibility # _____

Audio / Visual: Microphone: Corded # _____ Monitor _____ Piano _____

For CBINT Program Use Only: Projector _____ Laptop _____ Screen _____

Projector (\$50.00 rental) Large Screen (\$50.00 rental)

Other Needs _____

Event Coordinator: _____ Email: _____ Phone: _____

Caterer: _____ Email: _____ Phone: _____

Arrival Time _____ Departure Time _____ Supplying serving staff / bartenders _____

Enhanced Kiddush / Lunch / Dinner: Buffet Style (full buffet or partial set) Plated

China Silver Glassware Disposable products (ours / theirs)

Drinks:

| | | | |
|-------------------------------------------------|-------------|---------------|-----------------|
| <input type="checkbox"/> Bar # _____ | Wine _____ | Ice _____ | |
| <input type="checkbox"/> Soda/lemonade | | Station _____ | At tables _____ |
| <input type="checkbox"/> Water | | Station _____ | At tables _____ |
| <input type="checkbox"/> Coffee – Regular _____ | Decaf _____ | Station _____ | At tables _____ |
| <input type="checkbox"/> Hot Water & Tea | | Station _____ | At tables _____ |

Desserts: Dessert Buffet Plated

Linens _____ Arrival Time _____

DJ/Band / Entertainment _____ Arrival Time _____

AV Equipment _____ Arrival Time _____

Florist / Centerpieces _____ Arrival Time _____

Photographer _____ Arrival Time _____

Videographer _____ Arrival Time _____

Other Vendors _____ Arrival Time _____

Other: (For B'nei Mitzvah and Shabbat related celebrations)

Bima Flowers Color Scheme Preferred _____

Attending Friday Shabbat & Oneg? _____ # Attending: _____ Oneg table flowers (\$30) _____

ALL SET UPS ARE DUE 10 DAYS PRIOR TO THE EVENT!
Please submit to Beata Abraham, Executive Director, at CBINT

CBINT Staff (required)

A Custodian is required at all events. A Kitchen Coordinator is required at all catered events. Kitchen Coordinator and Custodian fees are included in rental for 4 hours. Additional time will be applied to your

account following your event at the rate of \$25.00 per hour. Security Staff, arranged by Congregation Beth Israel Ner Tamid, is required for all private events with entertainment at a rate of \$50.00 per hour, per officer with a minimum of 3 hours.

Kitchen Staff: Number needed (4 hour minimum): _____ Arrival Time: _____
 Custodial Staff: Number needed (4 hour minimum): _____ Arrival Time: _____
 Security Staff: Number needed (4 hour minimum): _____ Arrival Time: _____

I agree that CBINT is not responsible for the loss of any personal property belonging to my guests or me. I understand that CBINT is a totally smoke free building.

I agree to pay the fees above, the total of which is enclosed. If the building is left in the same condition as prior to my use, and if there is no breakage or other damage to any property of CBINT, the deposit fee of \$200.00 will be credited towards labor charges (if any) or returned to me.

If there is breakage or damage to any property of CBINT or the carpet is left in a state that requires professional cleaning, I agree to be fully responsible for its replacement or repair. I also understand and agree that CBINTi will keep my deposit and apply it towards the total of this expense.

I agree to be fully responsible for, and to defend and indemnify CBINT and hold it harmless from and against any claims of third parties and any liabilities, losses or damages, including, without limitation, all reasonable attorneys' fees incurred or paid by CBINT or its agents, arising out of or in any way connected with the use of the facilities by myself and my guests. Notwithstanding the foregoing, CBINTi may, in its discretion, elect to defend itself against any claim subject to indemnification hereunder and upon such defense by CBINT, I agree to pay the reasonable costs of such defense, including and without limitation, all reasonable attorneys' fees.

Applicant Signature: _____ Date: _____

Congregation Beth Israel Ner Tamid
 Representative Signature: _____ Date _____

RENTAL RATES: (includes: Kitchen Coordinator (4 hrs.), Custodian (4 hrs.), set up, tear down, tables, chairs, dishes, glassware, flatware, kitchen usage, easels, microphones)

| Space: | Member Value Rate: | Non-Member Rate: | |
|----------------------------|---------------------------|-------------------------|----------|
| Sanctuary only | Complimentary | \$500.00 | \$ _____ |
| Social Hall | \$500.00 | \$700.00 | \$ _____ |
| Chapel | \$300.00 | \$500.00 | \$ _____ |
| Promenade | \$200.00 | \$350.00 | \$ _____ |
| Library | \$ 50.00 | \$150.00 | \$ _____ |
| Classrooms (per classroom) | \$ 30.00 | \$ 50.00 | \$ _____ |
| Outdoor Area | \$300.00 | \$500.00 | \$ _____ |

Variable:

| | | | |
|-----------------------------|----------|-----------------------------------------------------------------|----------|
| Cleaning / Reset: | \$200.00 | (applies to 2 events – same space, same day) | \$ _____ |
| Security Guard | \$ 50.00 | (per hour (3 hr. min.), per officer. required for large events) | \$ _____ |
| Recording/Streaming Service | \$ 50.00 | (sanctuary only) | \$ _____ |
| Projector/Screen | \$ 50.00 | (each) | \$ _____ |
| Custodial | \$ 25.00 | (billed \$25 per hour after event beyond 4 hour rental) | \$ _____ |
| Kitchen Coordinator - | \$ 25.00 | (billed \$25 per hour after event beyond 4 hour rental) | \$ _____ |

Sponsorships: (non-applicable to B'nei Mitzvah)
 Bima Flowers \$80.00 \$ _____

Security Deposit: \$200.00 Date Received: _____ \$ _____
Balance: _____ \$ _____