

KAUA'I VETERANS CENTER
3215 Kauai Veterans Memorial Hwy.,
Lihue, Hi 96766 (808) 246-1135
Rental Application/ Agreement

Applicant/Sponsor: _____ Veteran/Active Duty (circle one)

Name: _____ Relationship: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Email Address: _____ Phone Number: _____

Type of Event: _____ Date of Event: _____ Today's Date: _____

___ **Preferred Military Rate** \$750.00 plus tax max seating 350 (Deposit required \$350.00-refundable)

It is for the Veteran/ active duty, their parents, grandparents, children, and grandchildren (circle one)

The rental rate includes all the tables, chairs, stages, use of the kitchen, supplied bathrooms, ample parking & use of the ice machine during the event. This is for 6 hours from 8 am – 2 pm or 5 pm – 11 pm, or other _____

___ **Non-Military Rate** \$1500.00 plus tax max seating 350 (Deposit required \$500.00-refundable)

The rental rate includes all the tables, chairs, stages, use of the kitchen, supplied bathrooms, ample parking & Use of ice machine during the event. This is for 6 hours from 8 am – 2 pm or 5 pm – 11 pm, or other _____

___ ***Concerts & Corporate Conferences** Starting from \$2500.00 plus tax-max seating 650 audience style (Deposit Required \$500.00 non-refundable & certificate of insurance liability naming Kauai Veterans Center as additionally insured) *requires a licensed, bonded, and insured security guard agency, copy of agreement contract & logistics.

___ **Additional Day** for setup \$350.00 Plus tax (10am – 4pm)

___ **Additional Outside setup or Outside setup only** \$350.00 Plus tax

___ **Kitchen Only** \$275.00 plus tax

___ **Conference Rooms-Silver and Bronze Star Conference room** \$650.00 plus tax *See website.

___ **Conference Room-Purple Heart Conference room** \$400.00 Plus tax *See website.

Sub Total: -----\$ _____

Sales Tax @ 4.7120% -----\$ _____

Total due payable to the **KAUAI VETERANS CENTER** -----\$ _____

I (We) hereby agree to the following charges and conditions and take full responsibility for the use of the Veterans Center Facility and its contents.

Print name _____ Signature: _____

Management: _____ Date: _____

