



3725 Chicago Road
Steger IL 60475
708 277-6777

Hourly Rental Terms of Agreement

Rental Terms

Hourly Rental Fees are \$25 per hour. Fees include use of tables, chairs & stereo system. Requested time slots should include all required set up and clean up time. Renter will gain access to the studio at the specified time. Renter agrees to forfeit their time slot if renter is not available to gain access to the space within 10 minutes of agreed upon time. Renter may be responsible for locking up the premises upon departure; deadbolts and knobs. Departure time is electronically monitored. Renter will be invoiced for any additional time spent in the space. Additional rental fees will be due upon receipt. A \$20 fee is charged in order to change a time slot once it is booked. **Rental Fees are non refundable. No Exceptions.**

Studio Clean Up

Clean up is responsibility of Renter. Leave the space as you found it. We provide all necessary cleaning supplies. They are located in the back changing area and under the sink in the bathroom. We do not have a dumpster. Renters may leave secured garbage bags in the back room near the back door. Renter will be invoiced for any time needed to clean the space after renter has departed at a rate of \$30/hr. Clean up fees will be due upon receipt.

Rules & Regulations

Renter assumes all responsibility for all guests and personal property brought into the space. Renter is financially responsible for any damage caused by Renter or Renters guests. Be respectful of the neighbors while choosing the volume of music. RTM reserves the right to amend the Rules & Regulations without notice.

Indemnification

Renter agrees to indemnify and reimburse RTM and its agents for all claims, costs and expenses of every kind. This includes reasonable attorney's fees arising from any breach or default on the part of Renter in the performance of any term of this agreement, or from any other unreasonable act of neglect on the part of Renter or Renters guests.

Waiver

The undersigned hereby agrees to waive any and all claims or causes of action that the Renter or Renters guests has, or may have in the future, due to any personal injury or property damage that might result from participation in any exercise, dance, workout, or other activity taking place at Room To Move Studio. The undersigned agrees to release Loren Harn and Room To Move Studio from any and all liability for any loss, damage, injury or expense that the participant may incur, or that the participants next of kin may incur in any activities with Loren Harn and Room To Move Studio due to any cause whatsoever.

By signing this terms of agreement the undersigned acknowledges, understands and agrees to be bound by such terms relating to the rental and/or participation within Room To Move Studio.

Renter Name _____ Date _____

Rental Request Form

Date _____

Name _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Email _____ Birth Date _____

Program Name (if applicable) _____

I am interested in _____ Hourly Rental _____ Resident (Regular Time) _____ Resident (Flex Time)

Please provide two professional, educational or volunteer references:

Name	Relationship	Telephone
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Name	Relationship	Telephone
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Briefly describe your intended use of Room To Move and any important notes :

Requested Times/Dates

Day	Time	Purpose	Rate	# Of Hours	Total

Submit your request via email RoomToMoveStudio@live.com, fax 708-898-0617 or in person at our office located next door inside Dressed To Groove, 3729 Chicago Rd, Steger during regular business hours. A supervisor will contact you by phone or email within 3 business days. If you do not hear from us within that time frame, call 708-269-8621 to insure your request was received.

Hourly Rental fees are due in full with signed Terms Of Agreement to complete the rental process.

Residential Contracts will be emailed to you upon approval. A security deposit check in the amount of \$500 (to be stapled to contract) and first months rent is due in full with signed contract to complete residential process. 3 Month/4 hours a week minimum apply (\$80/mo)

Office Use Only

Date Received: _____ Contact Date: _____ Approved By: _____

Important Notes: _____