



71 Airport Road
West Tisbury, MA 02575
Ph: 508-693-7022

**Conference Room
Rental Application**

Organization:
Contact:
Address:

City: Zip:
Phone:
Email:
Request Date:
Start Time (include setup):
End Time (include clean-up):
Expected Attendance:
Description of Activity:

Will a caterer be delivering food?
Yes No
Caterer:

Conference Room Being Requested:

ARRF Conference Room

General Aviation Conference Room

ARRF Conference Room

Maximum Occupancy is 17 persons

Rates: \$200 per hour

Tenants: 50% Discount

General Aviation Conference Room

Maximum Occupancy is 8 persons

Rates: \$100 per hour

Tenants: 50% Discount

The user is responsible for clean-up and for full repairs of any damage.

Furniture must be restored to original arrangement. No amplified sound, no alcohol, no smoking, no parties, no commercial/retail operations. No storage of material prior or after rental. The room must be left in a clean and orderly condition. No food may be left in the room.

**If you accept the terms,
please sign:**

Payment accepted before use.

Checks or Credit Card accepted for payment.

Checks can be made payable to:

Martha's Vineyard Airport

The requested applicant waives, releases, and discharges The Martha's Vineyard Airport, The Martha's Vineyard Airport Commission, and The Martha's Vineyard Airport employees from all liability for any loss or damages, including personal injury, death, property damage, medical expense and any other type of expense (collectively "damages") while the requested applicant is in, upon or about the facility premises. This also includes liability for any loss or damage caused by the condition and /or maintenance of the facility or any equipment.

The applicant also acknowledges and agrees that immediately upon entering will inspect the facility. It is agreed that the use of the facility constitutes acknowledgement that the inspection of the facility and equipment are safe and reasonably suited for use and accepts the facility in its present condition.

Applicants certify that they have read and voluntarily sign the release and waiver of liability and indemnity agreement and agree to all terms.

Applicant Signature:

Printed Name:

Date: