

La Salle Reception Center at Notre Dame Church

Function Agreement

Custo	mer/Contact Person:		
Addre	ss:		
Phone (Day)		(Evening)	(Cell)
Date:		Time:	
Hall R	eserved:	Contracted	Fee:
		Agreement	
2.3.4.	A non-refundable deposit of \$300.00 is required to reserve the date and must accompany this agreement. All deposits received will be applied to the final statement. Prices are guaranteed as of the date the initial deposit is received, if within twelve months of the event. Events booked over one year in advance are guaranteed to increase no more than 10% of the initial contract price. Payment in full is due to Ia Salle Reception Center two weeks prior to the event. The only acceptable form of final payment is certified bank check, money order or cash. Customer acknowledges receipt of the Terms of Agreement, Cancellation Policy, Alcohol Policy, and General Procedures documents and agrees to abide by them. Ia Salle Reception Center will not be held responsible for any customer-supplied		
6	any and all damages ca	used by their own vendo	_
6.	La Salle Reception Center is not responsible for vendors' and guests' items lost or stolen from the facility.		
7.	hereby releases and dis- directors, agents, emplo- assigns, from and with a kind, known or unknown	charges and covenants r oyees, and affiliates and respect to any and all cla	nt and legal effect of this release, not to sue, La Salle and its officers, their respective successors and aims and all causes of action of any have rising in whole or part from the cilities or properties.

Amount Paid_____ Date_____

Please sign and return one copy with deposit.

PLEASE MAKE ALL CHECKS PAYABLE TO: BLESSED JOHN PAUL II PARISH Mail to: Margaret M. Farrand, 19 Winter Street, Southbridge, MA 01550