BURKE VOLUNTEER FIRE and RESCUE DEPARTMENT (BVFRD) Fairfax County Company 14 9501 Old Burke Lake Road , Burke , Va. 22015

(703) 764-8842

DECLARATION PAGE RENTING PARTY: ____ CONTACT NAME: _____ DAYTIME PHONE: EVENING or CELL PHONE: ADDRESS: TYPE OF EVENT: ______NUMBER OF GUESTS (250 or less):______ ALCOHOL: Yes* No *Alcohol beverage liability form must be signed. DATE OF EVENT: Month ______ Day _____Year _____ (If any event is cancelled less than 60 days prior to the date scheduled for the event, BVFRD reserves the right to retain all monies collected.) SETUP TIME: _____ EVENT TIME: _____ CLEANUP HOUR: _____ (SEVEN HOURS TOTAL) (Final hour is for cleanup; kitchen closed, music off, no more drinks served. Non-compliance will result in deposit being withheld.) RENTAL COST: ADDITIONAL HOURS: \$150.00 per hour _____ (Must be added no less than one month prior to event) FULL KITCHEN USE FEE (use of STOVE/OVEN**): \$150.00_____ **Only licensed and insured caterers permitted to cook on stove or use conventional ovens!! TOTAL RENTAL:_____CHECK #_____ CREDIT CARD _____ 50% BALANCE DUE (NO LESS THAN 60 DAYS PRIOR TO EVENT) 50% BALANCE DUE (NO LESS THAN TWO WEEKS (14 DAYS) PRIOR TO THE EVENT) \$500.00 SECURITY / DAMAGE DEPOSIT REQUIRED FOR ALL EVENTS. DEPOSIT: _____CHECK #____CREDIT CARD _____ _____, as an individual or an authorized representative of the Renting Party have read, received and agree to the terms and conditions set forth in the attached Hall Rental Agreement provided to me on this date, to which this Declaration Page shall serve as the signature page to the entire Hall Rental Agreement. AUTHORIZED SIGNATURE: _____DATE: _____DATE:

DATE:

AUTHORIZED by BVFRD: _____