



Application for Use of the Public Spaces at the Coral Gables Museum

Name: _____

Address: _____ Business Phone: _____

E-mail: _____ Date of Event: _____ Time: _____

Type of event: _____ Anticipated attendance: _____

ALL EVENTS HAVE A 2 HOUR MINIMUM RENTAL FEE

Requested venue: Community Meeting Room \$250 per hour · Fewell Gallery Loggia \$300 per hour
2nd Floor Terrace: \$150 per hour · Courtyard: \$300 per hour · Plaza: \$2500 per event ·
Entire Museum: \$4000

Staffing requirements: The Museum requires a \$25 per hour event staffing fee per 100 people and a \$75 post event clean-up fee.

Total fee: _____

Catering:

_____ will provide _____ as attached.

I have read and understand the Policies and Procedures and agree to be bound by the terms of the Policies and Procedures and Application for Use.

Signature

Date

Print Name

CREDIT CARD AUTHORIZATION

Card Type (circle one) : M/C VISA AMEX Card Number: _____

Expiration Date: ____/____/____ Authorization Code: _____

Card Holders Name: _____
(exactly as it appears on the credit card)

Billing Address: _____

Card Holder Phone Number:() _____ - _____

Card Holder Signature: _____

Card Holder Name (PRINT): _____

Date Of Signature: ____/____/____

