



7"סב CENTRE FOR JEWISH LIFE CALGARY CAMPUS

134 FORGE ROAD SE, CALGARY AB T2H 0S8

P: 403.281.3770 F: 403.281.0338

E: INFO@CHABADALBERTA.ORG W: CHABADALBERTA.ORG

HALL RENTAL AT CHABAD LUBAVITCH OF ALBERTA

BOOKING FEES - (All fees are per day charge)

- | | |
|--|------------------------|
| 1. Housekeeping & Maintenance (Applied to every event) | \$55.00 |
| 2. Hall | \$500.00 per day |
| 3. Kitchen use (including Kashrut fees) | \$75.00 per hour |
| | \$475.00 per day |
| 4. Cleaning | \$35.00 per hour |
| 5. Putting furniture back in the proper order | \$45.00 per hour |
| 6. Tablecloth rental | \$15.00 per tablecloth |
| 7. Food preparation | \$35.00 per hour |



CONTRACT

Please complete and print clearly

Date: _____

Name of Host: _____

Home Number: (____) ____ - _____

Work Number: (____) ____ - _____

Cell Number: (____) ____ - _____

Fax Number: (____) ____ - _____

Email: _____

Type of Event: _____

Date of Event: _____

Dates Kitchen Used: _____

Name of Caterer: _____

Work Number: (____) ____ - _____

Fax Number: (____) ____ - _____

Email: _____

Number of Guests: _____

Number of Chairs Needed: _____

Number of Tables Needed: Large (seats 12) _____

Medium (seats 6-8) _____

Please complete what applies:

Housekeeping & Maintenance (Applied to every event)	\$55.00		\$55.00
Entire social hall	\$500.00 per day x _____	= \$	_____
Kitchen use (including Kashrut fees)	\$75.00 per hour x _____	= \$	_____
	\$475.00 per day x _____	= \$	_____
Cleaning	\$35.00 per hour x _____	= \$	_____
Putting furniture back in the proper order	\$45.00 per hour x _____	= \$	_____
Tablecloth rental	\$15.00 per tablecloth x _____	= \$	_____
Food preparation	\$35.00 per hour x _____	= \$	_____
Total Amount Fees Owning:			\$ _____

A 50% deposit of the total amount must be paid prior to the event. Balance to be paid within 7 days of the event.

A donation to support our pantry would be greatly appreciated. All donations are tax deductible.

I would like to support Chabad Alberta's pantry efforts with a donation of \$ _____

Total Amount Paying: Total Amount Owning: \$ _____ or 50% Deposit: \$ _____

Please specify Donation: \$ _____
= Total Amount Paying \$ _____

Payment Information:

Credit Card

Visa MasterCard Amex

Credit Card Number: _____ Expiration Date: ____ / ____

Cardholder's Name: _____ Cardholder's Signature: _____

Billing address: _____

Cheque Payable to Chabad Lubavitch of Alberta

eTransfer payment to accounting@chabadalberta.org

By signing below, you indicate that you have read, understood, and will abide by all of the regulations and procedures outlined by Chabad Alberta.

Signature of Host

Signature of Caterer

Signature on behalf of Chabad Alberta

CHABAD LUBAVITCH OF ALBERTA

ABK ALBERTA KOSHER | ANNUAL CALGARY COMMUNITY MENORAH LIGHTING | ANNUAL COMMUNITY PASSOVER SEDER | ASSISTANCE, COUNSELLING & TZEDAKAH | BEN DOCKTOR MEMORIAL GOLF CELEBRATION | CALGARY YACHAD HEBREW SCHOOL | CAMP GAN ISRAEL | CHABAD LUBAVITCH OF EDMONTON | CHABAD OF THE ROCKIES | CHAPLAINCY | CKIDS CALGARY | COMMUNITY MIKVEH - LEADERSHIP & HALACHA | CTEEN CALGARY | FRIENDS OF CALGARY CHABAD HOLIDAY CELEBRATIONS | MIKVEH ASHER (MEN) | THE CALGARY JLI (JEWISH LEARNING INSTITUTE) | THE FAIGEL SHAPIRO KOSHER PANTRY | THE FRIENDSHIP CIRCLE OF CALGARY | THE PAMELA SILVER-ROBINS CHABAD LUBAVITCH YOUTH CENTRE