COLLETON MUSEUM & FARMERS MARKET “MARKET HALL” RESERVATION FORM

The reservations and arrangements for use of the Colleton Museum & Farmers Market event space known as “Market Hall” must be made through an authorized representative of the facility. No reservation is confirmed until this form is completed (with payment) and the Director of the Colleton Museum & Farmers Market gives final approval. Any questions should be directed to our Events Coordinator, Eartha Cunningham, at 843-549-2303.

ONE HALF OF THE RENTAL RATE (non-refundable) IS EXPECTED WITH COMPLETION OF THIS RESERVATION FORM. Balance is due two weeks prior to the event.

PLEASE READ THE “FACILITY USE GUIDELINES” AND OUR RENTAL BROCHURE BEFORE COMPLETING FORM:

Name of Event:
____________________________________________________________________________

Description of Event:
____________________________________________________________________________

Space Requested: (circle one) Market Hall & Outside Pavilion
Outside Pavilion Only

Rental Rate includes the use of 125 folding chairs and 4 tables. Additional Tables ($6 ea.) may be rented:

Would you like additional Tables? How many? ______

Sponsoring Organization or Individual Responsible:
_________________________________________________

Address: _______________________________________________________________

Phone: ______________________

Contact Person If Different than Above:
____________________________________________________________________________

Address: _______________________________________________________________

Phone: _____________

Date & Time of Event: 
_______________________________________________________________________
Anticipated Set-up Time: _______________________________________________________

Anticipated Attendance: _________________________

Entrance Time: ______________________Exit Time: ________________ (For set-up/ cleanup needs)

Will alcohol be served? ________________ Will food be served? _________ If yes, describe (i.e. hors d’oeuvres, dinner, etc.)
____________________________________________________________________________

Will an admission fee be charged? _____If so, amount charged? _________

If alcohol is served will there be a cash bar in addition to entry? _______________________

Organization/Individual Responsible for Payment:
____________________________________________________________________________

*Signature of responsible party: ________________________________________________

Date: __________________

*By signing this form you acknowledge that you have read and understand the Facilities Use Guidelines and will abide by all stipulations set forth in this document.