

THE GOOLSBY CHAPEL

1622 Maple Street, Denton, TX

RENTAL AGREEMENT

WEDDING
 RENEW VOWS
 MEMORIAL SERVICES
 RELIGIOUS SERVICE

OTHER _____ Event Name _____

Date of Event: _____

Multiple Date Reservation: List dates/time below (use back of this form if necessary)

_____ / _____ / _____ / _____ / _____ / _____

Start Time _____ AM/PM End Time _____ AM/PM (includes setup and take down) Est'd Attendance: _____

Additional Fees/Needs:
 Tent(s)
 Folding Chairs
 Folding Tables
 Attendant
 Special Opening (when classes are not in session)

Client: _____ Individual Group/Department _____

UNT Student Org. _____ UNT Department-Acct # _____

UNT Graduate (Smtr _____ Yr _____)
 UNT Employee (Dept. _____)

UNT Retired (Yr _____)
 Non-Affiliate:
 Corporate
 Civic
 Private

Student/Employee ID # _____ Driver's License State _____ # _____

Address: _____

City/State/Zip: _____ E-mail _____

Phone: () _____ Alternate Phone: () _____

Authorized Co-Client: _____

Phone: () _____ Alternate Phone: () _____

I, the Client, acknowledge that I have read the Goolsby Chapel operating policies attached here to and incorporated herein and agree to abide by the conditions as set forth therein.

Client	Date	Co-Client	Date
UNT Advisor (if applicable) print		Signature	Date
UNT Advisor's Office/Department		Telephone	
UNT Co-Advisor (if applicable) print	Date	Signature	
UNT Student Activities/Organizations	Date	Conference Coordinator for Auxiliary Services	Date