

# The Joseph Saxton Gallery of Photography

520 Cleveland Avenue N.W., Canton, Ohio 44702  
Telephone (330) 438-0030 Fax (330) 456-9566

## Facility Rental Agreement

Name of Renter/Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone#: \_\_\_\_\_ Fax#: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Sponsor (if applicable): \_\_\_\_\_

Type of Event: \_\_\_\_\_

Day and Date of Event: \_\_\_\_\_ Guest Count: \_\_\_\_\_

Day, Date and Time Set-up Will Begin and End: \_\_\_\_\_

Time Event Will Begin and End: \_\_\_\_\_ Time Cleanup Will End: \_\_\_\_\_

Please Check Desired Options:

\_\_\_\_\_ Drape Manager's Desk (\$25) \_\_\_\_\_ Move Kiosks (\$150) \_\_\_\_\_ Holiday Rental (\$150)

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**If your event is approved, a security deposit of \$200 is required to reserve the Gallery space. This amount is in addition to the Rental Fee. The deposit is fully refundable, should no damage occur to the facility or if the event is cancelled at least **8 WEEKS PRIOR TO YOUR EVENT**. The Rental Fee of \$700/four hours includes two hours of set-up and one hour of cleanup. Any additional time is charged at the standard rate of \$125/hour. **WE STRICTLY ADHERE TO THIS POLICY**. Please make checks payable to The Joseph Saxton Gallery of Photography.**

Security Deposit Date: \_\_\_\_\_ Check # (if paid by check)/Amount/Date \_\_\_\_\_

Rental Fee Due Date: \_\_\_\_\_ Check# (if paid by check)/Amount/Date \_\_\_\_\_

Additional Options: \$ \_\_\_\_\_ Check# (if paid by check)/Amount/Date \_\_\_\_\_

### **FOR OFFICE USE ONLY:**

TIME IN: \_\_\_\_\_ TIME OUT: \_\_\_\_\_ TIME/\$ OVERAGE: \_\_\_\_\_ DAMAGES: \$ \_\_\_\_\_

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## Alcohol Policy

Will alcohol be served at your event? Yes: \_\_\_\_\_ No: \_\_\_\_\_

The Gallery holds a D5 Liquor License. Any alcohol served at your event must be purchased from the Gallery. Ohio law does not permit renters to supply their own alcohol or to purchase it from their selected caterer. Please call us to speak with the Gallery or Event Manager, to discuss your alcohol needs. We are able to provide information regarding wine, beer, or spirits along with pricing. We offer both Shelf and Premium selections.

**Your alcohol selection must be finalized no later than 30 days after the deposit has been made. SALES TAX WILL BE ADDED TO YOUR TOTAL. PAYMENT, IN FULL, IS ALSO DUE AT THAT TIME.**

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## Renter's Agreement

I have read, understood and agree to abide by the *Facility Use Guidelines* and *Alcohol Policy*. **I agree to pay my rental fee and for my alcohol selection no later than 30 days after my deposit is secured. The Gallery has the right to otherwise offer the date of my event rental to another party.** All information provided herein is accurate and complete to the best of my knowledge.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ in Canton, Ohio.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

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## Co-Sponsor's Agreement (if the renter is under the age of 21 or if an employee is signing on behalf of his employer)

I have read, understood and agree to abide by the *Facility Use Guidelines* and *Alcohol Policy*. I agree to become the official sponsor of the above renter's event and assume responsibility for the care and oversight of the facility during the event.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ in Canton, Ohio.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

## Joseph Saxton Gallery Representative

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

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## Facility Use Guidelines

- 1) If your event is approved, a security deposit of \$200 is required to reserve the Gallery space. This deposit is fully refundable should no damage occur (so please inform a member of the Gallery Staff should you see any damages during set-up, such as a damaged wall or upholstery, which is torn, to avoid being held liable for them) to the facility during the event or **if cancelled 8 weeks prior to the event. Please keep this timeline in mind, should you need to cancel your event. Any repairs not covered by the security deposit will be charged to the renter, according to Appendix A.**
- 2) **YOUR RENTAL FEE AND ALCOHOL PAYMENT ARE DUE, IN FULL, NO LATER THAN 30 DAYS AFTER YOUR DEPOSIT HAS BEEN SECURED. The Gallery otherwise reserves the right to offer the facility to another renter.** Rental fees include the cost of normal staffing, utilities, maintenance and custodial needs. An additional charge of \$150 will be incurred for removing the four small kiosks from the Main Gallery, \$25 to drape the manager's desk and a \$150 up charge for holiday rentals. **NO furniture or ARTWORK will be moved or removed for any event. Checks should be made payable to: The Joseph Saxton Gallery of Photography.**
- 3) **Cancellations made 8 weeks prior to the day of the event will result in a complete refund. Less than 8 weeks will result in a refund of the security deposit ONLY.**
- 4) The *Facility Rental Agreement* must be filled out and signed prior to using the facility. The person signing the *Agreement* must be at least 18 years of age and an authorized agent, if the rental facility is for use by an organization.
- 5) The Gallery is a "non-smoking" facility. Smoking is prohibited within 20 feet of the main entrances, exits and operable windows. All smokers must comply with current smoking laws.
- 6) Decorations may not be attached to any part of the building using nails, staples, tacks, tape, glue, putty, etc. **NO LIT CANDLES ARE PERMITTED. Authentic, unlit candles or electronic candles may be substituted.**
- 7) Everything brought into the building or onto the grounds by the renter must be removed at the close of the event, that same day. All rental items brought into the facility by independent contractors, such as tables, chairs, linens, glassware, flatware and dishes must be removed by the next business day, following the event. Business days and hours are Wednesday through Saturday, noon to 5:00 p.m. Remaining items become the property of The Joseph Saxton Gallery of Photography.

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- 8) Youth groups must have adult chaperones present, at a ratio of one adult per ten students.
  
- 9) If the event includes food, it is the responsibility of the renter and/or chosen caterer to provide any necessary equipment and all service items including refrigeration, warming ovens, catering equipment, linens, dishes, glassware, utensils, etc. The Gallery does not provide these items.
  
- 10) **RECYCLING IS MANDATORY!** All aluminum or steel cans, foil or foil pans (scrape and rinse off excess food), glass, cardboard (both corrugated and non-corrugated, such as cracker boxes), #1 through #7 plastic (only) and paper products (such as flyers or brochures) must be recycled. Please see a Gallery Staff Member concerning any questions you may have.

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The Main Gallery is approximately 5925 square feet. This Studio Gallery is approximately 1290 square feet. Together, these rooms accommodate 250 guests.

The garage is approximately 4284 square feet. This area is used for the event staging and catering needs only.

## **Rental Rates (we impose a 4 hour minimum rental)**

Main Gallery and Studio Gallery	\$700 (first four hours)
Each additional hour	\$125
Garage (for caterer's use)	Gratis

**Memorial/Labor Day Weekend, New Year's Eve/Day and the 4<sup>th</sup> of July have an additional holiday charge of \$150. We are closed on Easter, Thanksgiving and Christmas Eve/Day.**

- **Please include dining considerations for two Gallery Staff Members.**

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## Room Set-Up

Please inquire with the Gallery Manager regarding any set-up needs such as tables or chairs. The event rental includes some furniture (please see the opening page of the *Event Rental* portion of our website, at [www.JosephSaxton.com](http://www.JosephSaxton.com)). Additional requirements are the responsibility of the renter. We are not affiliated with any business, so renters may use the supply company of their choice. The Gallery Manager can make suggestions regarding area rental companies, upon request. It is the responsibility of the renter/caterer to set-up and tear down the Gallery, for the event. Set-up may take place the day before the event, if the Gallery is available. Cleanup must take place at the close of the event, that same day.

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## Contact Information

Maria Hadjian - Acting Manager

Telephone: (330) 438-0030

Fax: (330) 456-0030

Hours: Wednesday through Friday noon - 5:00 p.m.

E-mail: [Gallery@JosephSaxton.com](mailto:Gallery@JosephSaxton.com)

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## Appendix A

### **Stains**

Gallery Floor	\$10 per square inch
Garage Floor	\$25 per square foot
Gallery Walls	\$25 per affected area, up to 4 square feet
Kiosks	\$300 per affected panel
Artwork	See "Damage to Artwork"

### **Scratches, Dents, Chips, Marks, Cuts, etc.**

Gallery Floor	Subject to quote from repair contractor
Gallery Walls	\$25 per affected area, up to 4 square feet
Kiosks (light damage)	\$25 - \$50 per affected area
Kiosks (moderate to severe damage)	\$300 per affected panel
Artwork	See "Damage to Artwork"

### **Gallery Equipment**

Mechanical, HVAC, Plumbing, Electrical, Printing, Framing, etc.	Subject to quote from repair contractor
Chairs and tables (beyond normal wear and tear)	Replacement cost

### **Fire, Smoke and Burns**

Spent fire extinguisher	\$50 plus cleaning
Fire or police response	Starting at \$50
Fire or smoke damage	Subject to evaluation
Cigarette/cigar smoke or burns	Subject to evaluation

### **Damage to Artwork**

Chipped or scratched frame	\$10 per affected area
Frame, total loss	Replacement cost
Damage to glazing	Replacement cost
Damaged, but sellable photograph	Depreciation cost
Photograph, total loss	Replacement cost

**All other damages will be assessed on an individual basis. Renters are responsible for all Gallery property during their event, including damage caused by caterers, event planners, entertainment personnel, guests, etc. Any damages incurred must be paid for, in full, no later than 30 days from the date marked on the invoice for damages. Unrecovered damages may be sought in any court holding jurisdiction in Canton, Ohio.**

Please print and sign your name, acknowledging your acceptance of these terms.

Print Name \_\_\_\_\_ Signature \_\_\_\_\_