Oak Bay Hall

609 NB-170 ~ Oak Bay ~ E3L 3Y9 ~ 506-467-3030
events@chocolatetown.ca

Requests are not considered confirmed until you receive a booking number from our agents, Monday-Friday 9am-5pm (excluding holidays). Payment is due 48 hours prior to event or reservation may be subject to cancellation.
Reservations cancelled with less than 48 hours notice are subject to full charge.

Rental APPLICATION

Renter Information

Contact Person:	
Mailing Address: *Includes Postal Code*	
Phone #: Email Address:	

Will there be alcohol at your event? Yes / No
If YES - SNB permit and proof of event insurance required min 72h prior

Event Information

Billable time is the set-up start time to event clean-up end time

Event Name			
Date of Event:		Number of People:	
Hall Access/Set-up Start Time:		Clean up/End Time:	

- ❑ All decor items must be removed from the facility at the end of the event and all tables and chairs must be stacked in the designated area
- ❑ MDSS is not responsible for any damages or losses to any items that are not immediately picked up.
- ❑ The ceiling, walls and centre must be left in the exact condition as it was found before any decor was attached. Any wire, twine, clips or other instruments that were placed on the ceiling must be removed and all ceiling tiles must be put back in place if they were moved. Only 3M or painters tape may be used - tacks are not allowed. Users will be billed for damages to room surfaces.
- ❑ MDSS is not responsible for loss of renter supplies, equipment, or any other property, which is under the care and control of the renter.

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I declare that I have read, understood & agree to the contents of this rental application and the information package in its entirety:

Signature: _____ Date : _____

Credit Card Authorization/Payment Information

I, the undersigned cardholder, authorize the merchant "Municipal District of St. Stephen" to charge my credit card for purchases related to reservation. I agree that my information may be saved by the merchant for future payments and understand that this can be revoked at any time with request. I understand that my card will be charged 48 hours prior to the event date and if a cancellation is not placed, in writing, prior to 48 hours I will be charged as per the Cancellation Policy, which I have read and understand. I, the undersigned understand that in case of a payment being declined, the rental will be cancelled.

Card Type: ☐ Visa Credit ☐ Mastercard Credit ☐ Other: _____		
Card Holder Full Name: _____		
Credit Card Number: _____		
Expiration Date: _____	Postal Code: _____	CVV/CVC: _____

Card Holder's Signature: _____ Date: _____