

BERMUDA MARITIME MUSEUM

RENTAL APPLICATION & AGREEMENT



*Please print, complete in ink, and mail to Philippa Burke, Bermuda Maritime Museum,
P.O. Box MA 133, Mangrove Bay MA BX, Bermuda or fax to (441) 234-1735*

Name of group or organisation

Contact person

Mailing address

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Tel Fax Email

Rental date

Type of function

Start / end time of function Number of guests

Facility required

- Commissioner's House
- Queen's Exhibition Hall
- Keep Yard
- Other (please specify)

Additional information / special requirements

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I/We agree to rent the venue indicated above for the date stated. I/We have read the Facility Rental Terms and Conditions at www.bmm.bm and agree to abide by them. I/We agree to indemnify and hold harmless the Bermuda Maritime Museum from and against the consequences of any claims arising as a result of any personal injury loss or damage sustained by ourselves or any third parties or their goods and effects whilst on the premises of or within the complex known as the Bermuda Maritime Museum.

Accepted by

Signature Printed name Date

Organisation

Position

<p>FOR BMM OFFICE USE ONLY</p> <p>Deposit of \$ received on</p> <p>Balance due on</p>
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