

MULLIGAN’S LODGE  
RENTAL AGREEMENT  
600 Mulligan Dr.  
Grand Haven, MI 49417  
Reservation Information: (616) 842-2550



RESERVATION DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

RENTAL TIME: \_\_\_\_\_ to \_\_\_\_\_

CLEANING TIME: \_\_\_\_\_ to \_\_\_\_\_

NAME OF RENTER: \* \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ TYPE OF EVENT: \_\_\_\_\_

*\*The person whose name appears on this rental agreement agrees to be on-site for the duration of the event\**

WILL ALCOHOL BE SERVED? YES ☐ No ☐ IF YES, SEE FOOD & ALCOHOL RULES

Mulligan’s Lodge is rented in four and eight hour increments. Additional hours may be available for purchase (after the eight hour rental), and will be reviewed on a case by case basis. In June & July, there are set hours for Saturday/Sunday rentals, from 10 am-2 pm and 5 pm-10 pm. Renters will be given one hour after the designated rental time period to complete cleanup of facility.

WHEN VACATING PREMISES, PLEASE CALL STAFF AT 616.638.0135 FOR FINAL INSPECTION

TYPE OF EVENT: \_\_\_\_\_ NUMBER OF GUESTS \_\_\_\_\_

RATES:	FOUR HOURS/with ALCOHOL	EIGHT HOURS/with ALCOHOL	HOURLY RATE (AFTER EIGHT HOURS OF RENTAL)
<input type="checkbox"/> Resident/Non-Profit	<input type="checkbox"/> \$150.00/\$250.00	<input type="checkbox"/> \$250.00/\$350.00	<input type="checkbox"/> \$10.00
<input type="checkbox"/> Non-Resident	<input type="checkbox"/> \$175.00/\$275.00	<input type="checkbox"/> \$300.00/\$400.00	<input type="checkbox"/> \$15.00
<input type="checkbox"/> For Profit	<input type="checkbox"/> \$225.00/\$325.00	<input type="checkbox"/> \$400.00/\$500.00	<input type="checkbox"/> \$20.00
<input type="checkbox"/> Weddings	<input type="checkbox"/> Please Call For Pricing		

SEATING CAPACITY IS 70

PARTIES SERVING ALCOHOL ARE REQUIRED TO PAY A REFUNDABLE \$200.00 SECURITY DEPOSIT FEE  
PARTIES NOT SERVING ALCOHOL ARE REQUIRED TO PAY A REFUNDABLE \$100.00 SECURITY DEPOSIT FEE

By signing below:  
I am confirming that the address on this form is my primary residence and that I have read the RENTAL POLICY and will comply with the use of this facility as outlined in the said policy on the reverse side of this agreement. I also acknowledge that all the information provided is true and accurate, any false representation will result in the loss of the security deposit.

I agree to return the facility to the condition it was rented, including the following: wipe down all surfaces, wipe down refrigerator, microwave and sinks, vacuum floors, remove trash to dumpsters and return table set up to original layout.

I acknowledge that I have read and received a copy of the Rental Policy and clearly understand what my responsibilities and duties are.

I acknowledge as the renter of the facility, I am responsible for the entire event, including the conduct of all who attend.

Signature \_\_\_\_\_ Date \_\_\_\_\_

FOR OFFICE USE ONLY

RENTAL FEE DUE: _____	PAYMENT RECEIVED _____
SECURITY DEPOSIT DUE: _____	PAYMENT RECEIVED _____

## RENTAL POLICY

The City of Grand Haven reserves the right to inspect and control all private functions. Liability for and damage to the premises will be the responsibility of and charged to the sponsoring organization. The party that has rented the facility must be on-site during the scheduled event. Normal wear and tear on facility is acceptable, but candle wax, crushed in stains, marks on walls, will be subject to carpet cleaning charges and/or wall painting charges. Items may NOT be affixed to walls, ceiling or windows.

**TIME:** The Lodge is open for rental seven days a week from May 1 through October 31. Rentals are based on a 4 or 8 hour block of time with an extra charge for additional hours after eight hours of rental. The rental times include any decorating and set up before the event. One additional hour is provided, at no charge for event clean up. City staff is responsible for unlocking and locking the facility. **All rentals have set times; please leave the building by the end of the cleanup period to allow us to get ready for the next scheduled event and ensure return of your deposit.**

**CANCELLATIONS:** Deposits will be fully refunded if the cancellation occurs 90 days or more prior to the event AND the facility can be reserved with another comparable event. Events cancelled from 89-31 days before the date of the event will forfeit 50% of the deposit. All events canceled within 30 days of the event will forfeit the full deposit.

**CLEAN UP OF THE FACILITY:** Counters and tables must be cleaned, floors must be vacuumed and all garbage must be removed from the facility and place in the dumpster located behind the building. The facility must be left in the condition in which it was rented. **Failure to leave a clean facility will result in the loss of the security deposit.**

**DECORATING:** Please keep decorations to the table tops, damage to surfaces occur when taping, tacking and nailing decorations. If damages occur you risk forfeiture of the security deposit. Please do not use glitter or confetti at the facility.

**FOOD & ALCOHOL:** Renter is allowed to bring in their own food; a licensed and insured caterer is not required. The facility has a refrigerator, freezer and microwave. No utensils or serving pieces are supplied. No alcohol is allowed outside the building; Sec 5.4, Grand Haven Code of Ordinance.

**SMOKING:** The Lodge is a non-smoking facility. This policy complies with the Michigan Public Act 198 of 1986 'Clean Indoor Act'. Failure to adhere to this policy will result in forfeit of deposit and could result in an additional fee. **No smoking within 25 feet of the building.**

**PARKING:** There are two handicapped parking spaces by the building. All others must park in the paved lot located behind the building. No parking on the grass around the building or on the Lodge driveway. Unloading in the circular driveway is allowed, but vehicles must be moved to parking lots immediately after unloading to allow for emergency vehicles to pass through.

**FIRE CODES AND ROOM CAPACITY:** Renters of the Lodge must comply with the local fire safety regulations, state laws and building regulations. Lodge capacity is 70.

**DAMAGES:** Cost of damages to the building, furnishings, and equipment beyond normal wear must be paid by the Renter at such time as damages occur. Do not remove tables and chairs from the building.

**NO LIABILITY – INDEMNIFICATION:** Renter agrees that the City shall not be liable to Renter or its agents, employees or guests for any personal injury, property damage, and loss of life or property arising out of Renters use of Mulligan's Lodge. Renter further agrees to indemnify and hold the City, its agents, employees and elected officials harmless against any and all claims, causes of action, judgments, damage, expense, costs, including but not limited to attorney fees and costs through appellate and enforcement or collection proceedings, arising from or relating to Renters use of Mulligan's Lodge, including the acts or omissions of Renter, to employees, agents or guests.

**ACCEPTANCE:** Renter acknowledges the foregoing as an accurate statement of the agreement for renting Mulligan's Lodge and agrees to be bound by it. The parties acknowledge that this rental agreement is between the City and the party's name mentioned above, and that there are not understandings or agreements other than those set forth in this rental agreement. Renter shall pay all of the city's costs and legal expenses incurred in connection with the enforcement of this agreement upon breach of any provision by Renter.

**PAYMENT IS DUE IN FULL TO RESERVE THE DATE      THE SECURITY DEPOSIT FEE IS DUE 30 DAYS PRIOR TO THE EVENT**

SUPPLIES: We provide (14) 6 ft. rectangular tables and 70 chairs, which is the maximum allowed by Fire Code

**Make checks payable to the City of Grand Haven  
and mail to:**

**Grand Haven Community Center  
421 Columbus  
Grand Haven, MI 49417**

**To pay online (fees apply):**

[https://client.pointandpay.net/web/  
CityofGrandHavenMI](https://client.pointandpay.net/web/CityofGrandHavenMI)

**Email payment receipt to: [cseise@grandhaven.org](mailto:cseise@grandhaven.org)**