



Rental Agreement for Chairs

Please complete this form and return it by hand, email (membership@bng.bm) or fax (441) 295-2055) to the BNG.

Client Information:

Name: _____
Company Name: _____
Address: _____
Contact information: (phone) _____ (fax) _____
(email) _____

BNG member? (Y/N) If yes, membership type: _____

Note: Depending on your level of membership, you may qualify for a discount. For more information, please contact a BNG representative.

Rental Information:

Date requested: _____
Amount of chairs: _____

Chair Rental Fees:

\$ 2.00 per chair up to 100 chairs

Number of chairs x \$2.00 = \$ _____
Discount Y/N \$ _____
Total amount of Rental \$ _____

All chair rentals are for a 24-hour period.

Surcharges: A surcharge of \$100.00 will be charged in the event that the chairs are not returned on time.

Damages:

The client will be responsible for any damages to the chairs. All damaged chairs must be replaced within 7 business days.

Payment Schedule:

We ask for a deposit of 50% of the rental cost upon signing the contract. This confirms your booking and ensures the Chairs will be available to you at the date listed above. The balance is to be paid in full when you return the chairs.

Agreement:

I, the undersigned, agree to the terms and conditions of the Chair Rental Contract for the Bermuda National Gallery as stated.

Signed _____
Dated _____