

CONFERENCE ROOM RENTAL AGREEMENT

Please submit your payment in full along with the completed rental agreement form to jbillmyer@boisechamber.org or djones@boisechamber.org.

Organization: _____ Contact Name: _____

Address: _____ Phone: _____

Email: _____ Member Nonprofit Non-Member

Date(s) Required: _____ Start Time: _____ End Time: _____

Idaho Central Credit Union Conference Room Blue Cross of Idaho Conference Room

Expected Attendance: _____ Type of Activity: _____

Idaho Central Credit Union Conference Room

Blue Cross of Idaho Conference Room

	Nonprofit*	Member	Non-Member	Nonprofit*	Member	Non-Member
Up to 2 hours	\$50	\$100	\$200	\$100	\$200	\$400
2-4 hours	\$75	\$150	\$400	\$150	\$300	\$800
Up to 8 hours (all day)	\$125	\$250	\$800	\$250	\$500	\$1,600

**Must be a member to qualify for Nonprofit rate (nonmember Nonprofits can reserve at member rate), meeting space is available during business hours (M-F, 8:00 am - 4:30 pm), please allow for prep/clean up time when scheduling*

Special Requests: _____ Total Due: _____

ANY CANCELLATION LESS THAN A WEEK FROM RESERVATION WILL RESULT IN A 50% REFUND, FULL REFUND OTHERWISE.

Signature _____

Date _____