Matter of Trust Eco-Hub
Space Rental Agreement

Thank you so much for choosing the Matter of Trust Eco-Hub! We are very excited to work with you to ensure that this event is delightfully memorable for your group!

**Participant Information:**

Name of Event ____________________________________________

Contact Person 1 Name _________________________ Phone ___________________________

Contact Person 2 Name ________________________ Phone ___________________________

Estimated Number of participants___________________ Age group __________________

How did you hear about Matter of Trust? ________________________________

Are you aware of any participants with severe allergies? Yes/No

If yes, what allergies _______________________________________________________

This is NOT a nut-free zone. _____ Initial acknowledgement and agree to notify guests

Are you aware of any physical limitations of your participants? Yes/No

If yes, what types of limitations ______________________________________________

I understand that the event may be photographed for Matter of Trust Archives; these archives are used to show the public and funding sources what we do. If any participants in the event would not like to be photographed, it is my responsibility to inform Matter of Trust Photography Staff where they are. _____ Initial Acknowledgement

**Time Specifics**

This agreement guarantees you exclusive use of the Eco-Hub for the allotted hours. The gift shop is still open to the public from 12 – 5 PM. As we have multiple events scheduled, we do ask that you limit your use of the space to the agreed times. Staff only has a 30-minute clean-up window. You are more than welcome to pass more time in the gift shop while staff gets ready for the next scheduled event.
One time event:
Date of Event_________ Duration_________ Theme_________________________
Start Time _________  End Time _________

Repeating event:
Date Start __________ Date Finished____________ Theme _________________________
Repeated Days:  (circle)  Mon Tue Wed Thu Fri Sat Sun
Duration_______    Start Time _________  End Time _________

Date Start __________ Date Finished____________ Theme_________________________
Repeated Days:  (circle)  Mon Tues Wed Thu Fri Sat Sun
Duration_______    Start Time _________  End Time _________

Food
We do not provide food as part of our package; however we do have a recommendation list of caterers, pizza places that deliver and other restaurants that we have worked with in the past. To be more green, we can help you pre-order and serve your food on eco-friendly tableware as well.

Fees/Payment:
All events have a Space Rental Fee and refundable Security Deposit. The deposit will cover the cost of any destroyed property at the Eco-Hub during your event if that occurs. Additionally, if you DO NOT show up for the event or do not give us at least 24-hour notice for cancellation, that deposit will be kept to cover the expenses of materials and staff. Your Security Deposit will be reimbursed after the event and premises inspection. We are always very grateful to renters who consider donating the Security Deposit after the event.

Payment can be made by calling (415) 252-1177 and leaving credit card information or by bringing a check, credit card, or cash to our:

Matter of Trust Eco-Industrial Hub
1566 Howard Street
San Francisco, CA 94103

Checks can also be mailed to:

Matter of Trust
Office Headquarters
99 Saint Germain Ave
San Francisco, CA 94114.

Please write separate checks for your Space Rental Fee, and Security Deposit.
Space Rental Fee: $__________  
   Paid with  __Credit/Debit __Check__Cash 
   Date Paid  ___/____/______ 

Security Deposit: $__________ (.5 cost of Reservation Fee)  
   Paid with  __Credit/Debit __Check__Cash 
   Date Paid  ___/____/______ 

Donation:   $60       $100  $______other  
   Paid with  __Credit/Debit __Check__Cash 
   Date Paid  ___/____/______ 

I/we ____________________________________________ have read 
the Moff Event Contract and discussed my event, themes and expectations with the 
Matter of Trust Staff. All the information written above is correct and complete. The 
Event host is expected to have any necessary Emergency Information for their party. 

______________________________________________________________________________ 
Printed Name of Event host    Signature    Date 

______________________________________________________________________________ 
Printed Name of Assisting host    Signature    Date 

______________________________________________________________________________ 
Matter of Trust Staff Member    Signature    Date