

## FACILITY ACCESS AGREEMENT

This Agreement is effective and entered into as of the				to the			
between the <i>Northern Life Museum</i> &							
Contact information ( ) Email:							
Project/Activity:							

# Terms and Conditions for Access of Museum Facilities

You agree to be responsible for the access of the museum facilities and that you will ensure that the facilities will be cleaned as specified in the following terms and conditions document. Any cleaning required after your access will be charged to you, with payment required within one week of the rental date.

#### General:

- The Museum, by agreeing to grant access to their facilities to you, places a high level of trust in you and/or your organization to care for our building. All facilities on the main upper floor are off limits outside of normal business hours.
- The access to this facility and its property is not be used for any other Project/Activity then the one listed above.

## **Cleanliness & Safety:**

- The Museum's facilities will be kept clean of any debris and materials that could be potential hazard to the safety of its visitors and staff.
- Emergency Exits will be kept clear of any obstructions and or obstacles to maintain access at all times.

PO Box 420, Fort Smith, NWT X0E 0P0 Phone: 867-872-2859 Fax: 867-872-5808 admin@northernlifemuseum.com

### Key Loan:

- The recipient agrees to ensure that all keys are kept securely.
- The recipient agrees to report all incidences of lost, stolen, or misplaced keys to the Administration & Event Coordinator immediately.
- Lost keys may result in a replacement fee payable to the Museum.
- All keys will be returned to the Administration & Event Coordinator upon the completion of project or activity as stated above.
- Under no circumstances will any individual loan or transfer to any other person any key which has been entrusted to him/her.
- Duplication of any key by any individual other than authorized personnel of the NLMCC is strictly prohibited.

Key No. Date of Issue: \_\_\_ / \_\_\_ / \_\_\_\_ Date of Return: \_\_\_ / \_\_\_ / \_\_\_\_

I have read the above, and agree to the terms and conditions as outlined.

Signature (of recipient)

Date

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