



AAHII.org

891 Valkenburg Street

Honolulu, HI 96818

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(808)-291-6518

RENTAL AGREEMENT

Event Date: _____ Set Up Time: _____ Event Start: _____ End Time: _____

Business/Group Name (Name that will go on our website): _____

Responsible Person(s): _____

Address: _____

Email: _____ Phone: _____

Type of Event: _____

Planned Number of People Attending Event (Children included): _____.

1. NO CASH PAYMENTS ACCEPTED – Cashier's Check, Money Order ONLY

Payable to AAHII.org

2. REMAINING BALANCE AND PROOF OF SPECIAL DUTY OFFICER(S) ARE DUE 30 DAYS PRIOR TO THE EVENT.

3. User agrees that the Rental Contract and Rental Rules have been read and are understood.
User agrees to abide by the Rental Contract and Rules.

4. Cancellation within 30 days of the event, a \$150.00 charge will be deducted from the deposit

5. All refunds and security deposits will be mailed out within fifteen (15) business days.

Signature of Responsible Person

Date

Office use Only

Security Deposit: _____ Amount: \$ _____

☐ Meeting Room Rate: _____ Amount: \$ _____

☐ Banquet Hall Rate: _____ Amount: \$ _____

☐ Both Room Rate: _____ Amount: \$ _____

☐ Multi-Day Rate: _____ Amount: \$ _____

Payment Balance Due (Date): _____ Balance Due\$: \$ _____

HPD/Sheriff (If Applicable): Date confirmed: _____ # of Officers _____ Time: _____ to _____

Signature of Armed-Forces Association of Hawaii, Incorporated

Date