

City of Canton

Canton Depot Reservation Form

Canton City Hall: 210 N Dakota, Canton, SD 57013, 605-987-2881
 Canton Depot: 600 W 5th Street, Canton, SD 57013

___ Viking Room ___ Museum

Name: _____

Address: _____

Phone Number: _____

Email: _____

Type of Event: _____ Approx. Number of People Attending: _____

Date(s) Reserved: _____

Times Reserved (to include setup & cleanup time): _____

The following security deposit is required

___ Viking Room (\$100) ___ Museum (\$150.00)

The deposit will be mailed to the payee within seven business days, after your event if the keys are returned, no personal property is missing or damaged, the rental is cleaned in accordance with the check list and there are no damages to the rental premises.
 If the event is cancelled, the deposit will be refunded less any applicable cancellation fees.

Rental Fee Schedule		
	Viking Room	Museum
Half Day	\$100.00	\$100.00
Full Day	\$175.00	\$175.00

Cancellation Fee		
	Viking Room	Museum
1-3 Months Prior	50% of Deposit	50% of Deposit
1 Month Prior	70% of Deposit	70% of Deposit

50% off Room Rental Fee for Non-Profit Groups Monday—Thursday

****All fees are subject to all applicable sales taxes.**

I have received a copy of a rental agreement with the rental rules and guidelines. I agree to complete the rental agreement and pay all rental fees at least two weeks prior to the function. I also understand that I must agree and abide by all rules and terms of the agreement.

Signature of Renter: _____ Date: _____

For Office Use Only

Person Paying Deposit: _____
If different than renter, include Address & Phone Number)

Date Paid: _____ Amount: _____ Cash or Check # _____

Received by: _____ Booked on Calendar: Given Rental Agreement: Received Signed Rental Agreement:

Cancellation Date: _____ Cancellation Fee: _____

Refund Check:

Number: _____ Date: _____ Amount: _____