

**Day of Wedding  
Parish Hall Contract**  
**Sacred Heart Catholic Church, 502 2<sup>nd</sup> Ave SE, Aberdeen, SD 57401**  
**605-225-7065**

This contract for use made this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

between Sacred Heart Parish and \_\_\_\_\_

**USER INFORMATION:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip Code

Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Alternate Contact: \_\_\_\_\_  
Name Phone Number/E-Mail

**USE:** Date of Wedding: \_\_\_\_\_ Number of people: \_\_\_\_\_

Duration: Beginning at \_\_\_\_\_ and ending at (1 hour after the ceremony) \_\_\_\_\_

Only light snacks are permitted under this contract. The food may be stored in the refrigerator. You MUST bring your own paper products for serving. NO alcohol is permitted.

**SECURITY DEPOSIT:**

**A \$150.00 REFUNDABLE security deposit is required. The deposit check will be returned after the event, providing the User has fully complied with the contract, there is no damage to the premises AND the piano has not been moved. Please make check payable to: Sacred Heart Church**

**\$150.00 refundable security deposit paid.** Date: \_\_\_\_\_ Check #: \_\_\_\_\_

I have received a copy of the Contract Terms and Conditions for use of the Sacred Heart Parish Hall for the Day of Wedding use and agree to the same. By signing this contract, I agree that I will be held liable for any damage incurred by my use of the Sacred Heart Church Parish Hall.

User: \_\_\_\_\_ Date: \_\_\_\_\_

Parish Staff Member: \_\_\_\_\_ Date: \_\_\_\_\_

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**OFFICE USE ONLY**

Date Deposit was Returned: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Check #: \_\_\_\_\_

If the full amount of the Deposit was not returned, please state the reason why below.

User: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature is only required if damage is reported)

Parish Staff Member: \_\_\_\_\_ Date: \_\_\_\_\_