



## Studio Rental Agreement

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone(s) \_\_\_\_\_  
Email \_\_\_\_\_

By signing this document, I am agreeing to pay \$1.75 a square foot for \_\_\_\_\_ square feet for a total of \$\_\_\_\_\_ a month to rent studio space at the:

Arvada Ceramic Arts Guild  
5870 Olde Wadsworth Blvd  
Arvada, CO 80003

Studio Rental Duration:

- I agree to a one year commitment  
 I agree to a commitment of \_\_\_\_\_ to begin on \_\_\_\_\_ and end on \_\_\_\_\_

I agree to give at least 30 days notice to the Board of Directors in writing before I end my space rental. I, in return, will be notified no less than 30 days in advance in writing of any changes to this agreement by the membership.

Signature \_\_\_\_\_

Board of Director's Signature \_\_\_\_\_