Wilcox Community Center Reservation Form

Event Date: _____

Individual or Organization: _____ Contact Person: _____

Complete Mailing Address: _____

Telephone Numbers: Home: _____Work: _____ Other: _____

Type of Function: _____Number of People Expected: _____

Time Set-up will Begin: _____Time Clean-up will be Done: _____

Stipulations, Terms, Conditions of Agreement for Use of Wilcox Community Center:

1. Alcoholic beverages and tobacco are not allowed on the grounds or in the facility by City ordinance. Violation of this stipulation will be grounds for forfeiture of complete security deposit.
2. Approximately 10 tables and 80 chairs are onsite available for use.
3. Rental Party is responsible for complete clean-up. Including sweeping and/or mopping of all floors, washing tables, chairs, counters, sinks, microwave, and refrigerator. Necessary supplies are provided.
4. Rental Party is responsible for removing all tape left from decorations on tables, walls, and windows. Do not place any tape on chairs, ceiling or painted overhang above kitchen/office area.
5. Rental Party is responsible for bagging all garbage, leaving it inside main entrance before leaving.
6. Rental Party is responsible for locking and securing ALL windows and ALL doors before leaving.
7. Key may be picked-up at City Hall no more than two business days prior to reserved date. Key must be returned within two business days after reserved date.
8. Parties failing to clean or lock-up appropriately will be assessed $25.00 plus any and all costs associated with correcting the situation.
9. Cancellations: prior to 60 days from the date of reservation shall forfeit $15.00; less than 60 days from the date of reservation shall forfeit $25.00; cancellations after 30 days will forfeit $50.00 of the total reservation fee.

I have read, understand and agree to abide by the above stipulations as stated. I also understand that I am fully responsible for any and all damages and missing items while renting the facility.

_____ _____

Signed by Rental Party Rental Taken By

DO NOT WRITE BELOW THIS LINE

FOR OFFICE USE ONLY

Rent Charge: $_____

Date Paid: _____Receipt Number: _____

Check Number:_____Cash:_____