EAST ALTON PARKS & RECEATION

FACILITY RENTAL APPLICATION

NAME			
ADDRESS	CITY	STATE	ZIP CODE
PHONE	EMAIL		
DATE OF RENTAL	TYPE OF FUCTION	ROOM(S) REQUESTED	
TOTAL TIME OF RENTAL: START	FINISH		
in facility prior to the above startist needed the applicant will be on the EQUIPMENT REUEST: CHAIRS_COPY OF DRIVERS LICNSE OR ID RENTAL DEPOSIT\$100_	(Max 150) [(EMPOLYEE CHECK BOX) DATE PAID	aned up by the finish tin	me. If the additional time (Max 25)
THE RENTER WILL BE RESPONSII	R ANY CLEAN UP NOT DONE OR ANY BLE TO COVER ANY ADDITIONAL COS DATE PAID room is occupied from set to clean-	ST WHICH THIS DEPOSIT	
I, the user/rental applicant of the a	bove named facility, agree to the follow	ing responsibilities:	
 To supervise and maintain proper co All guest/ participants participate at ti NO ALCOHOLIC beverages allowed co Facility must be left as it was found on Notify the recreation department NC Rental fee must be paid in full two wo Your guest/participants may not enterincluded in your rental. \$100 Rental Deposit Must be paid at PLIES WITH ABOVE GUDELINES< dep X SIGNATURE OF APPLICANT X Applicant Initial *I understand ti X Applicant Initial *I understand ti 	all damages to the facility and /or equipment. Menduct during rental. Their own risk. The Village of East Alton assumes reproperty or within facility. NO smoking or vaping in better condition. Tables and chairs are in the DLESS THAN a week (7 days) for any cancellation eaks prior to the rental date. (\$10 late fee will be ear the facility prior to your rental time, or addition time of the application, which is held with applications to be picked up the following week day, after the facility for set up prior to the late I cannot enter the facility for set up prior to the late I have to have the facility cleaned up and pur that I will have to pay the additional fees for any that I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay the additional fees for any the set I will have to pay	no responsibility for any lost of coming in or within 15 feet of the burentals responsibility for set-up or deposit will be forfeited. added) al fees will be added. Participant of the ensure the above geter inspection (Monday-Friday). X DAT the above start of rental. t back as found by finish time.	lamage that may occur. ilding. Nopossession of cannabis. and tear-down. Intsmust use only rooms that are guidelines are followed. If COM-
Office Use Only:			

**RENTALFEEMUSTBEPAIDINFULLBY DEALINE OR \$10 LATE FEEE WILL BE ADDED TO RENTAL FEES.

**ANY RENTAL CANCELLED LESS THAN ONE WEEK PRIOR TO RENTAL DATE DEPOSIT WILL NOT BE REFUNDED.