FACILITY RENTAL CONTRACT Village of LaGrange 301 Liberty Street, LaGrange, Ohio 44050

_____\$20.00 Application Fee



l,	representing
	(name) (family, group or organization)
for(event or activity)	hereby reserve the following Village space: (circle one)
COUNCIL CHAMBERS (large hall)	or Atrium/Lobby (small hall) or Gymnasium
Event Date:	Time:: AM/PM to ::_ AM/PM
RENTAL CHARGES: (Insurance M	IUST be purchased; the Village will provide insurance information)
Village Hall Atrium: \$100.00 (Village Gymnasium:* \$25.00 per h *Please refer to Item #7 in t	age Residents) \$300.00 (non-residents); \$150.00 security deposit age Residents) \$200.00 (non-residents); \$150.00 security deposit our; \$150.00 security deposit he Building Use Policy for Gymnasium specific costs. Temergency employee on-call Fee \$50.00
	nd will comply with the terms, conditions, and general regulations set forth in nat no illegal activity will be conducted or permitted on Village of LaGrange irs of my event.
agree that I will accept full financial location. I understand that failure to future use of the facility. I also agre officials, representatives, and its en use of any facility of the Village of L	he individual responsible for all payments and activities for this event. It responsibility for personal injury and property damages during use of said a comply with all rules of this agreement may result in being prohibited from the to indemnify, defend and hold harmless the Village of LaGrange, its imployees from all liability, claims, damages, or costs for or arising out of the LaGrange, whether it be caused by the negligence of the user, LaGrange employees, or otherwise. The security deposit shall be returned to the

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applicant.

Make checks or money orders payable to: Village of LaGrange

Note: To arrange for the use of facilities, call Mary Kay Gates: 440-355-5555

ADDRESS:

The undersigned acknowledges receipt of the Village Policy Governing the use of its facilities.

EMAIL ADDRESS:

PHONE #: () - TEXT MESSAGING: YES NO

SIGNATURE: _____ DATE: _____