DUNN CENTER RENTAL CONTRACT

Renter Name:	Event Date:
Phone Number:	Email:
Group/Organization:	
Renter Address:	Phone:
Rental Period (check all that apply):	<u>Upper Level:</u> 8am-2pm or 3pm-9pm <u>Lower Level:</u> 8am-12pm or 12:30 pm-4:30 pm or 5pm-9pm
Purpose (i.e. fundraiser, party, shower, m	neeting, etc.)
Today's Date: Appro	ox. # of Guests: I have signed the Hold Harmless Agreement Y / N
	Please Note:
Included Amenities	NO ALCOHOL is permitted at the Dunn Center.
Bathrooms	Smoking is not permitted on the premises. This includes the parking lot.
Kitchen— Upper level only	You must vacate the property by the end of your rental period. The doors will unlock automatically at the start of your rental, and will lock at the conclusion. Exiting late will cause the alarm to sound and may result in forfeiture of your deposit.
Tables	
Chairs	
Electric Outlets	Any damages or un-warranted clean up will result in a loss in your deposit.
Climate Controlled Environment	If police assistance is called by the neighborhood, your privilege to use
Cleaning Supplies, Trash Bags	the facility will be terminated immediately. Exeter Township Police may arrest and detain any individuals and/or issue citations.
	Initial here
of the information contained herein understand all rules and regulations in A security deposit of \$200 is require in the form of a check (made payable)	Please read and sign the following: leted truthfully and to the best of my ability. I understand that any misrepresentation may result in the denial or cancellation of this permit. Further more, I have read and the Dunn Community Center Usage Policy that was provided to me by the Township. ed for rental of the Upper Level of the Dunn Center, and \$100 for the Lower Level, ble to Exeter Township) or a money order. Should damages be sustained in excess signing this document will be responsible for the total amount of the damages.
I have read and u	nderstand these statements, and accept the terms of this permit.
Renter's Signatur	re/Date:
OFFICE USE ONLY:	
Rental Fee CREDIT CA	ARD Deposit
CASH CHECK NO Date F	
Initials	Initials