

NAME:

CITY OF HAWARDEN COMMUNITY CENTER/MEETING ROOM FACILITIES RENTAL AND USE AGREEMENT

City of Hawarden and the undersigned Renter(s) Hereby agree to rent the following facilities at the rentals rates set forth below for the following dates and times:

Date(s) facility is needed:

Community Center

	<u>Rent</u>	<u>Deposit</u>
Resident	___ \$300.00	___ \$300.00
Non-resident	___ \$400.00	___ \$400.00
Resident community/ non-profit organizations	___ \$150.00	___ \$150.00
Non-resident community/ non-profit organizations	___ \$200.00	___ \$200.00
Guaranteed additional setup days @ \$50 per day	___ \$	___ \$N/A

Additional Items and Services

China _____ settings @\$2.50 each	___ \$	___ \$100.00
Audio/Visual System (All 3 items)	___ \$50.00	___ \$300.00

Cleaning Fee (Kitchen not included)	___ \$200.00	___ \$N/A
Optional Meeting Room Cleaning fee	___ \$20.00	___ \$N/A
City Office Hallway (Catering)	___ \$100.00	___ \$N/A

TOTAL DUE	_____	_____
TOTAL PAID	_____	_____
CREDIT (Chamber Businesses)	_____	_____
BALANCE REMAINING	_____	_____

Any special conditions, instructions and terms:

The undersigned Renter(s) hereby acknowledge that they have received and read a copy of the **Hawarden Community Center & Meeting Rooms Rental Rules**, which are hereby incorporated in this Agreement and they agree to be bound by all terms set forth in those rules. Renter(s) understand that they shall be held responsible for all rule violations, actions of, inaction by and damages caused by, their agents, invitees and others allowed or permitted in the facility while they are in possession under this Agreement.

Renter _____ (signature)

Renter's contact information for notice and other communications:

Name (please print)

Address

City, State, ZIP

Phone

Email