

City of Wixom Community Center Rental Application

Date of Event _____ *Activity* _____

Contact Person _____ *Address* _____

City _____ *Zip* _____ *Phone (H)* _____ *Cell* _____

FRIDAY AND SATURDAY RENTAL

50% Deposit is required to book any room and is NON-REFUNDABLE

	<u>Room</u>	<u>Day</u>	<u>Time</u>	<u>Rate</u>
<i>Please circle</i>	Ballroom	Friday	3 pm- 12 am	\$900.00
<i>Room Choice</i>	Ballroom	Saturday	9 am- 12 am	\$1,100.00
	Ballroom	Saturday	3 pm- 12 am	\$900.00

MONDAY-THURSDAY 9 am- 11 pm & SUNDAY RENTALS -Starting at 2 pm

50% Deposit is required to book any room and is NON-REFUNDABLE

	<u>Room</u>	<u>Room Capacity</u>	
<i>Please circle</i>	Ballroom	250	
<i>Room Choice</i>	Stage Room	100	<i>Date of Rental</i> _____
	ABC	80	
	AB	50	<i>Time of Event</i> _____
	A	30	
	B	30	<i>Kitchen Usage additional \$40 charge- Please circle</i>
	C	30	

Hold Harmless Agreement

The undersigned has read and understands the operational policies of the City of Wixom Community Center and agrees by such policies. The undersigned agrees and is hereby responsible for all damages to the Community Center building, property and equipment resulting from rental. Groups reserving a room at the Community Center are solely responsible for the actions of the persons they are serving. The City of Wixom is not liable for any incident as a result of the consumption of alcohol by patrons of the Community Center, during or after the lessee's rental of the Community Center. The undersigned lessee hereby indemnifies and hold harmless the City of Wixom, its employees and elected and appointed officials, and volunteers from any and all liability, claims, demands or losses, and the costs connected therewith, including but not limited to damage to City property, and for any damages which may be asserted, claimed, or recovered against or from the City of Wixom which arise out of, or is any way connected with the actions of invited or uninvited guests, on and off the premises during the term of this rental agreement.

Signed by: _____

Date: _____

For Office Use Only

Rental Fee _____ *Cash* _____ *Check#* _____ *Receipt #* _____

Deposit 50% _____ *Visa/ MC#* _____ *Exp. Date* _____

NON-REFUNDABLE *Security Code (Back of Card)* _____

Balance Due _____

Payment _____ *Cash* _____ *Check #* _____ *Receipt #* _____

Balance Due _____ *Visa/ MC #* _____ *Exp. Date* _____

Security Code (Back of Card) _____

Security Deposit \$500

Date Received _____ *Cash* _____ *Visa/ MC #* _____ *Exp. Date* _____

Date Returned _____ *Security Code (Back of Card)* _____



