

Village of Concord Community Center Rental Agreement

Individual/Organization Name _____

Type of Event _____

Address _____

Date Requested _____ Phone # _____

_____ Non-Profit Organization Rental Fee \$250.00

_____ Non-Commercial Rental Fee \$350.00

_____ Commercial Rental Fee \$550.00

\$100.00 Refundable Damage Deposit Included

Total Due \$ _____

Deposit \$ _____

Balance \$ _____

Total Paid \$ _____

Full Payment Due One Week Prior To Event

Rules For The Community Center

1. All decorations must be removed after event and dispose of with other trash
2. All candles must be in a container
3. No tape or markings on the floor, walls or ceiling
4. All spills on the floor must be cleaned with warm water and mop provided to you. Any bathroom mishaps must be cleaned before you leave the community center
5. After cleaning tables and chairs place them back in the table and chair room
6. Bag and seal all trash in provided bags and leave in trash cans . If, during your event ,you need to empty a trash can seal bag and place in 90 gallon trash can outside, by the back entrance
7. User is not responsible for any other cleaning
8. Turn off all light before leaving . (Do not touch fans)
9. Make sure all windows and doors are locked properly
10. No smoking is permitted anywhere inside this is a michigan state law. Smoking is permitted outside, cigarette butts must be properly disposed of in provided sand bucket
11. The adjacent parking lot to the west of the facility is the only parking lot you may use. There will be no parking across the street from the building
12. Max capacity for the community center is 250 people
13. Any violation of the rules will result in loss of damage deposit

Initials of Rental Representative _____ Date _____

Community Center Pre Event Checklist

Before each event an employee from the Village of Concord along with the representative of the event, will check the community for any damage and will note below.

Event _____ Date _____

1. Women Restroom _____

2. Men Restroom _____

3. Handicap Restroom _____

4. Floor All Rooms _____

5. Kitchen Area _____

6. Walls & Ceiling _____

7. Refrigerator & Microwave _____

8. Table & Chair Count _____

9. Exterior Areas _____

10. Cigarette Butt Cans _____

11. Miscellaneous _____

Employee Signature _____ Date _____

Signature below signifies that I have gone through the pre event checklist walk through and agree to the above damage. I also understand that I will not be charged for the above damage on the post event walk through.

Rental Representative _____

Signature _____ Date _____