

Vass Community Room
Rental Agreement

Person Responsible: _____

Address: _____ Phone: _____

Date of Function: _____ Estimated number of Participants: _____

Hours to be used: _____

	<u>Town Resident/Property Owner</u>	<u>Non-Resident</u>
Rental Fee:	\$100/day	\$125/day

Refundable Cleaning Deposit: \$100

If paying by check, please write two separate checks made payable to Town of Vass.

I agree to assume the responsibility for the use and care of the Town of Vass Community Room/kitchen/restrooms/entrance foyer and agree to leave them clean and in order. I understand that I will be held liable for any missing, damaged or soiled property and agree to compensate the Town of Vass for same.

The Town of Vass accepts NO RESPONSIBILITY for damage or loss to any person or property occurring during the use of the meeting room or parking lot.

Date: _____

Signature of Person Responsible

Town of Vass Representative

Front Door Key Issued: Y N

The following information is requested by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the ethnicity, race, and gender of the individual applicants on the basis of visual observation or surname.

Ethnicity: Hispanic or Latino Not Hispanic or Latino

Race: American Indian/Alaskan Native
 Black or African American
 White

Asian
 Native Hawaiian or Other Pacific Islander

Gender: Female Male

This institution is an equal opportunity provider and employer. If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office or call (866)632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail or US Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202)690-7442 or email at program.intake@usda.gov.

STATEMENT OF DISCLAIMER

In renting or using any of the properties owned by the Town of Vass, namely the Sandy Ramey Keith Park and the Community Room of the Municipal Building, neither the Town of Vass Board of Commissioners, nor the Town of Vass employees shall assume any responsibility for the loss of, or damage of, or injury to any property or persons placed on the premises by the user or users or for the loss or damage of any property or personal effects, including motor vehicles and their contents, or for any injury to the user. Its members, employees, agents, guests, or participants hereby agree to hold the Town of Vass, Town of Vass Board of Commissioners and Town of Vass employees harmless for any injury, loss or damages sustained while using any of the facilities owned by the Town of Vass.

The Town of Vass is committed to providing opportunities in access and employment in all programs, services, activities, and facilities without regard to age, race, color, religion, national origin, creed, political affiliation, or disability.

I have read and agree to the guidelines for using the above listed facilities.

Signature of Person Responsible

Date _____

Town of Vass Representative

COMMUNITY ROOM POLICY AND RULES

1. Reservations will not be made more than 3 months in advance.
2. Under no circumstances will the maximum occupancy of 120 persons be violated.
3. Tables and chairs must be put back the way you found them.
4. Possession of alcohol and/or any illegal substances is prohibited on town property. This would include any parking areas.
5. Possession of any weapons, legal or otherwise, is prohibited.
6. Selling of any type of merchandise, tickets, materials or services is not permitted.
7. No sneakers/shoes with wheels.
8. Children under the age of 13 must be supervised at all times.
9. Absolutely no taping or tacking anything to community room walls, doors, floor, ceiling, or glass.
10. The use of tobacco products, in any form, is prohibited.
11. Cancellation must be received at least 10 days prior to scheduled use to receive a full refund of rental fee and deposit.
12. Rental fee is per day with a day being 8:00 a.m. until 10:00 p.m.
13. Your deposit will be refunded if you meet the following condition:
 - a) All areas of the community room, kitchen, restrooms and foyer are left clean.
 - b) No damages have occurred during your rental time.
 - c) No equipment or supplies are missing.
 - d) All tables and chairs are returned neatly to storage closet without scuff marks to walls and floors.
 - e) No footprints, hand prints or other marks on the walls and no black shoe scuff marks on the floors.

I have read and understand the conditions of this rental. I understand that any violation of these conditions will be cause for an immediate revocation of this agreement. I further understand that by signing this statement that I am fully responsible for any damages (minor and other) that may occur during the time of my rental.

Signature of Responsible

Individual _____ **Date** _____