

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>
Please circle	Ballroom	Friday	3 pm- 12 am	\$900.00
Room Choice	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>	
Please circle	Ballroom	250	
Room Choice	Stage Room	100	Date of Rental _____
	ABC	80	
	AB	50	Time of Event _____
	A	30	
	B	30	
	C	30	

Kitchen Usage additional \$40 charge- Please circle

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) _____	



