2013 Hampton Community Center Rental Agreement

	•		,	
Date of Application				Page 1 of 2
Rental Fee	Amount			
Security Deposit	Amount	\$200.00	,	
Key Deposit	Amount	\$100.00	Date of Event:	
Name of Event				
				_
RENTER INFORMATION	l:			
Name:			Home Phone:	
e-mail:			Cell Phone:	
Street Address, Town,	City, Zip:			
Start time:		End Time:		
Evenested set up and he	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		امط	
Expected set-up and br	eak-down/clean-u	p time need	leu.	
Do you need to hire the	e Town's cleaning o	rew to clea	n up after vour event?	
	_		NO	
	YES		(Please note that by not choose	sing to
			utilize the Town's cleaning cre	•
			clean the facility yourself)	w, you woo
Expected Attendance:				
			•	
Which areas do you ne	ed to rent? (circle	all that app	ly)	
Please note: If you are	renting only a porti	ion of the bu	uilding, another area may be rei	nted to another grou
Upper Level	Lower Level	Kitchen	Outdoor only with a	access to bathrooms
.6				6 10
•	•	•	ng a caterer or preparing your o	wn food?
Using Cate	rer		Preparing own	
(In either case, please n	ote that the Comm	unity Cente	r does not provide cooking or w	varming equipment)
(Please refer to our list	of approved catere	rs; if your ca	aterer is not on the list, please l	et us know)
Caterer's Name:			Phone:	
caterer 3 Name.			Thone.	
Address:				
Contact parcon:				
Contact person:	ith a sourceforce	otoroul- C-	wificate of Linkilian Income	uiou to
rou must provide us w	ith a copy of your o	aterer's Cer	rtificate of Liability Insurance p	rior to your event.

Will you be serving liquor?	YES	NO
(If yes, you must provide us wi	ith a copy of your liqu	or license)
Do you want your event posted Yes	d on the Town of Ham No	pton's website and its events calendar? (circle one)
FEES:		
The Rental Fee for your event	is:	
Please make check payable to:	: Town of Hampton ar	nd note in the memo "CC Event"
"Town of Hampton") are due p	prior to your event. Yo	, (separate checks please made payable to ur checks will be sent back to you after your event, or nistrative Assistant in the First Selectman's Office.
The Fee to hire the Town's clea	aning Company for yo	ur event is:
Please make check payable to:	: Town of Hampton ar	nd note in the memo "cleaning"
and officials from and against a liabilities, costs and expenses (i connection with, damage to pr the Facility, including any acts of subcontractors. Renter shall property in, to, or around the Fadminasst@hamptonct.org or	any and all damage, lost including, without limit roperty or injury to perfor omissions of Renter rovide the Town of Hafacility of which it is aver firstselectman@hameter Town will be touring	ss the Town of Hampton and its employees, volunteers, ss, claims, suits, demands, actions, fines, damages tation, reasonable attorney's fees) arising out of, or in sons (including death) which arise out of renter's use of his/her agents, contractors, employees, invitees, and/or ampton with immediate notice of any injury or damage to vare, by calling 860-455-9132 Ext. 2, or by e-mailing ptonct.org
SIGNATURE OF RENTER:		DATE:
SIGNATURE OF TOWN REPRES	ENTATIVE:	DATE:
If you have any questions or co	oncerns, please call the	e First Selectman's Office at 860-455-9132 Ext. 2

Office hours are Tuesday 9a.m. to 4p.m. and Thursday 10a.m. to 7p.m.

Revised 7/19/12