

Community Center Rental Application

Date Requested	Rental Hours	rs am/pm_to		am/pm
Type of Function: (Describe)				
Number of People Expected		_(Maximum Capacity 99)		
Requested Set Up and Tear Down	(Extra Cha	arge)	Attach Copy of set-up layout requested	
Number of Round Tables	_with Chairs	(6 per	^r Table)	
Number of Rectangular Tables _	with C	hairs	(8 per Table)	
Special Instructions				
Name of Responsible Person (Please Print)		Organization Represented (Please Print)		
Is your organization Tax Exempt	?Yes	_ No (Exempt	Status form must be	e provided at time of payment)
Physical Address		Mailing Ac	ldress	
City, State, Zip		City, State	, Zip	
			[City Resident	or Non-Resident]
Contact Phone Number			(Pleas	se circle)

Note: All payments must be made in advance and all balances paid in full a minimum of two (2) weeks prior to the event.

Responsible Party must ensure that the Community Center is left in the condition it was found.

- o A/C turned to 78 degrees in summer and 60 degrees in winter
- o Refrigerator should be wiped cleaned and all items removed
- o All counters, tables and chairs are wiped clean
- o Tables and chairs are properly stored and left in the building
- o All decorations are removed
- o Restrooms left in a clean and orderly fashion
- Floors broom swept (and mopped, if necessary)
- All trash placed in proper containers
- o All personal items removed
- o Lights turned off
- Doors locked

Additional comments

Contact the Umatilla Police Department at 352-669-3561 or Parks & Recreation on-call staff at 352-602-0600 with any questions or issues that arise during reservation times.

Signature of Responsible Party Copy of Driver's License or Photo ID Required	Date
City Official	Date Received
OFFICE USE ONLY: DEPOSIT PAID \$200 \$\$\$ RENTAL FEE CLEANING FEE SALES TAX	ELIGIBLE FOR REFUND DATE: REFUND AMOUNT: REFUND: \$ □ YES □ NO