



# Vergennes Township

69 Lincoln Lake Ave. NE • P.O. Box 208 • Lowell, MI 49331 • (616) 897-5671

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*A Place Where People Like to Live*

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www.vergennestwp.org

## Vergennes Township Community Room Rental Application

- Rental Fees are \$150.00 for a 6-hour rental, additional time is \$25.00 per hour, paid in full hour increments.
- Use of the Audio/Visual equipment – see additional costs below
- Security deposit is \$200.00.

Rental Date and Hours (Includes set up and clean up!) \_\_\_\_\_

Today's date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Estimated Attendance \_\_\_\_\_

Purpose of Event \_\_\_\_\_

1. Rental Fee and security deposit are due with application and will secure your reservation date. (Please pay with separate checks if possible when event is within 3 months for convenient return of security deposit when conditions below are met. If event is further out than 3 months we will bill the deposit one month from event.) Audio Visual fees need to be paid before the event.
2. Security Deposit is refundable within 10 days following rental, after conditions on check list are met, and any additional fees are paid.
3. Complete refund is available only if reservation is canceled at least 2 weeks in advance.
4. The Township reserves the right to refuse or revoke permission to use the facility.

### Additional Fees -

- Late charge - \$25 each new hour \_\_\_\_\_
- Audio/Visual Charges –
  - Bluetooth – \$25 \_\_\_\_\_

- Monitor usage for power point/photo displays - \$25-\$50 - \_\_\_\_\_
- Microphones, camera for remote capabilities - hourly charge, staff required, minimum \$50 - \_\_\_\_\_

I agree to that I have read the rules and conditions, and that I accept complete responsibility and liability for damages to the building and /or equipment it contains and agree to adhere to all building usage rules and regulations as outlined in the Township's written policies. I agree to hold Vergennes Township and its elected and appointed officials, employees, or all those working on behalf of Vergennes Township, harmless from all claims arising from the use of the Township facilities.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

Name of Organization and Title if applicable \_\_\_\_\_

Front Door Entry/Alarm deactivation call \_\_\_\_\_

Back up number - \_\_\_\_\_

### **Vergennes Township Office Use**

**CLEANING CHECK LIST**

- Are tables and chairs returned to the appropriate locations? \_\_\_\_\_
- Has the carpet been vacuumed? \_\_\_\_\_
- Walls, doors and ceiling checked for damage? \_\_\_\_\_
- Is the kitchen clean? \_\_\_\_\_ Refrigerator, sink, oven, microwave all clean? \_\_\_\_\_  
Trash removed? \_\_\_\_\_
- Are restrooms cleaned, and all trash removed. \_\_\_\_\_
- List any damages - \_\_\_\_\_