APPLICATION & PERMIT FOR RENTAL OR USE OF MILLCREEK TOWNSHIP COMMUNITY CENTER

Group/Organization/Person in C	Charge:		
Address:			
Telephone Number:	Email Address:	Email Address:	
Purpose:			
Date(s) Reserved:	Hours Reserved:	to	
with the rules and regulations sed designated facility will comply rules and regulations set forth by 1. Will be responsible to 2. Assumes liability for 3. Agrees to not cook a 4. Will park ONLY in 6. Will observe all rule 6. There shall be no alc 7. Will observe facility 8. Sheriff's Departmen 9. There shall be a \$50 the designated return 10. I understand there is ***********************************	for all persons in the group or organs of any damage done to the facility. In any grease producing products in the designated areas. It is coholic beverages in the facility. It is common capacity: Table & Chair Chairs Only— Standing Only to or trustees have authority to enter additional fee for any lost key or key	oup or organization using the above the Township of Millcreek, and all nization using the facility. The above named facility. T	
Date	Signature of Person Responsi	ble	
_	Signature of Township Repre	esentative	

SCHEDULE OF RENTAL FEES

COMMUNITY ROOM:

Monday thru Thursday	Residents Non-Residents	\$50.00 \$100.00
Friday thru Sunday	Residents Non-Residents	\$75.00 \$160.00
Wedding Receptions	Residents Non-Residents	\$100.00 \$160.00

Effective: January 1, 1999