NORTH VIEW SENIOR CENTER

485 East 2550 North ~ (801) 782-6211

FACILITY RENTAL FORM AND CONTRACT

Name: _____ Date of Use _____

Address: _____ Purpose of Rental _____

Email: _____

City, State, Zip: _____ Hours of Use _____ to _____

AM / PM AM / PM

Home Phone: _____

Work or Cell: _____ Estimated Attendance: _____

Is this function open to the general public?	Y	N	Will there be a live band?	Y	N
Will there be admission charged?	Y	N	Will there be a DJ?	Y	N
Will participants be charged for food/drink?	Y	N	Will there be dancing?	Y	N

Absolutely **NO ALCOHOL** is allowed in the North View Senior Center, parking lot, or along the street surrounding the center. Any violation of this rule will result in the loss of all deposits and the possibility of criminal prosecution. **SMOKING IS PROHIBITED** in the North View Senior Center.

Charges	General	N.O./P.V.
Deposit (Refundable)	$300	$200
Auditorium & Kitchen*	$515	$155
first 4 hrs, includes setup & takedown		
*Kitchen is for food service only - no food prep allowed		
Initial Staffing Charge	$40	$40
Additional Hours _____	$103/hr	$52/hr
Additional Staffing _____	$10/hr	$10/hr
Total Charges	_____	_____

Payments			
Date	Amount	Method	Balance

I, the undersigned, in consideration of the use of the North View Senior Center hereby agree to abide by and enforce all rules and regulations pertaining to the use of this facility. I agre to be responsible for any and all liability, claims, loss, damages, costs and expenses, including legal fees, arising out of or resulting from any injury to person(s) or damages to officers, agents, employees and/or volunteers representing North Ogden City arising out of or resulting from use of the North View Senior Center. I agree to be responsible for any/all damages to property or equipment resulting from use of the North View Senior Center and understand that damage amounts may be in excess of the amount(s) of deposit paid. I agree to be responsible for charges resulting fromthe function going beyond the agreed upon length of time. North Ogden City reserves the right to cancel this agreement as deemed necessary by North Ogden City by actions of the Mayor, City Council or City Administrator. I understand that by reserving the North View Senior Center I am committed to the full terms of this Facility Use Agreement and if I find it necessary to cancel or change the date of use that deposits may be forfeited.

THE SIGNATURE BELOW CERTIFIES THAT I HAVE READ, UNDERSTAND AND AGREE TO ALL OF THE CONDITIONS AND RESTRICTIONS OF THIS AGREEMENT AND I SIGN THIS AGREEMENT OF MY OWN FREE WILL.

_____ _____

Signature *Date*