|  |  |  |  |
| --- | --- | --- | --- |
| Name: | | | |
| Phone Number:  (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_\_\_ | Mailing Address:  Email Address: | | |
| Event: Date: | | | # of Guests: |
| Beginning Time: | | Ending Time: | |
| Rent Due:  Damage Deposit Due: | | For City Staff Only:   * Rent Received * Damage Deposit Received * Damage Deposit Refunded | |
| Cleaning Deposit: | | For City Staff Only:   * Cleaning Deposit Received * Cleaning Deposit Refunded * Cleaning Charged \_\_\_\_\_\_\_\_\_ | |
| Insurance Information: PROOF OF APPLICABLE INSURANCE AND LICENSES MUST BE RECEIVED AT CITY HALL ONE WEEK PRIOR TO EVENT   * Proof of Insurance * Proof of Banquet License * Proof of Washington State Liquor License * Proof of Special Occasion License * Proof of Washington State Food Handlers Permit   Caterers must supply Banquet or Special Occasion Bartender’s License | | | |

**Rental Application Form**

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| Signature: |
| City Representative Signature: |

The undersigned hereby makes application to the City of Tekoa for use of the Community Center and certifies the information on this application is correct. The undersigned agrees to exercise the utmost care in the use of the premises and property. The renter shall indemnify and hold harmless the City of Tekoa, its elected officials, its employees and agents from and against any and all claims, demands, suits, actions, payments and judgments as a result of injury or death of any person or property damage to any or in any other manner grow out of any act or omission on or said facility by renter, its agents, guests or employees in the execution of this rental agreement including any and all expenses, including attorney fees and costs, legal or otherwise, incurred by the City, representative in the defense of any suit or claim.