

TARKILN COMMUNITY CENTER

RENTAL REQUEST FORM

Please fill out completely

Organization (if applicable): _____ Today's Date: _____

Contact Person: _____ Phone #: _____

E-Mail address: _____ Cell Phone #: _____

Mailing Address: _____

Please indicate the type of organization: (Circle One)

Non-profit organization

Small Business

Community Group

Individual/Family

Type of program/event offered: _____

Expected Number of participants: _____

Room(s) Requested: (Check box)

☐ North Hall(left side of building)

☐ South Hall(right side of building)

☐ Entire Facility

Date(s) Requested	Time In	Time Out

IMPORTANT: Include set-up & clean-up in requested time

I have read the Terms and Conditions for the Use of the Tarkiln Community Center and agree to abide to all of the policies set forth. As an authorized representative of the organization, I understand that by signing my name below I/we are accepting responsibility for all damages to the facility during its use.

Signature of Renter: _____ Date: _____

Do not write below this line - FOR RECREATION DEPARTMENT USE ONLY

Application is ☐ Approved ☐ Denied Date _____ ☐ Conflict ☐ Policy

Recreation Director Signature: _____ Date: _____

Additional Comments: _____

Fees Paid: \$ _____ Check # _____ Date Check received: _____

Security Deposit: \$ _____ Check # _____ Key #: _____ Key Returned: _____