



FACILITY RENTAL REQUEST FORM

Today's Date:
MM/DD/YY
/ /

Time:

Name of Applicant	Group / Organization (if applicable)

Residential Address	Mailing Address (if different from Residential)
Street:	Street (or P.O. Box):
City: State: Zip:	City: State: Zip:

Telephone Numbers	Personal Email Address
Home () Cell/Work ()	

Event Title / Proposed Activity	Attendance	Food / Beverage Service
		<input type="checkbox"/> YES <input type="checkbox"/> NO If yes, name of caterer:

Requested Date / Alternate Date	Times (must include set up time)
Requested Date: Alternate Date:	Start: am/pm Finish: am/pm

Facility Requested / Facility Fees (per hour)	Res.	Non-Res.	Non-Profit	Check
Party Room	\$30	\$39	\$25	<input type="checkbox"/>
Lehigh Multi-Purpose Room (stage)	\$30	\$39	\$25	<input type="checkbox"/>
Lloyd Multi-Purpose Room	\$40	\$50	\$30	<input type="checkbox"/>
Briggs Multi-Purpose Room	\$40	\$50	\$30	<input type="checkbox"/>
Mitchell Multi-Purpose Room	\$40	\$50	\$30	<input type="checkbox"/>
Garfield Commons (4+Kitchen)	\$150	\$189	\$125	<input type="checkbox"/>
Kitchen	\$50	\$65	\$40	<input type="checkbox"/>
Indoor Playground (After Hours)	\$75	\$95	\$60	<input type="checkbox"/>
Bouldering/Climbing Wall	\$75	\$95	\$60	<input type="checkbox"/>
1/2 Gym	\$30	\$39	\$25	<input type="checkbox"/>
Full Gym	\$60	\$75	\$50	<input type="checkbox"/>
Fitness Studio	\$40	\$50	\$30	<input type="checkbox"/>
Pool - Lap (After Hours)	\$50	\$65	\$40	<input type="checkbox"/>
Pool				
0 - 50 people	\$150	\$189	\$120	<input type="checkbox"/>
51 - 100 people	\$200	\$250	\$160	<input type="checkbox"/>
101 - 150 people	\$250	\$315	\$200	<input type="checkbox"/>

Amenities		
	Fee	Check
AV Cart - DVD, CD, TV, Projector (includes projection screen)	\$30	<input type="checkbox"/>
Podium/Microphone	\$20	<input type="checkbox"/>
Projection Screen (without projector)	\$10	<input type="checkbox"/>

Additional Fees	
After Hours Rental	\$50 per hour
Deposit	
100 + people	\$300
Alcohol Served	\$300

Totals	
Facility Fee	\$
Amenities Fee	\$
Additional Fees	\$
Facility Rental Total	\$

Special Requests / Needs / Accomodations?
<input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please explain below:

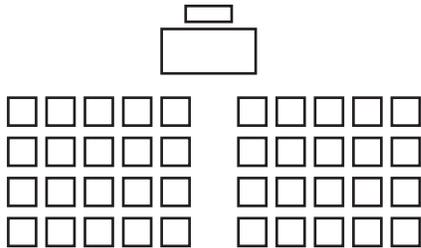
Please give a **2 week notice** for all facility rental reservations; also this is a **request form ONLY** - a staff member from the Erie Community Center will contact you to confirm your date and time. Thank you!

See back page for room set-up options.

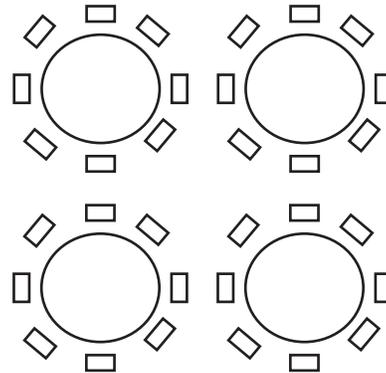
FACILITY RENTAL REQUEST FORM, cont.

Room Set-Up Options (check requested set-up):

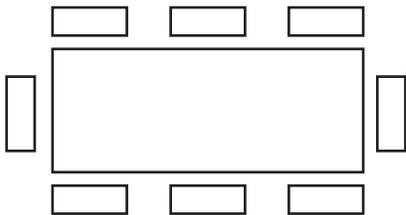
Theater



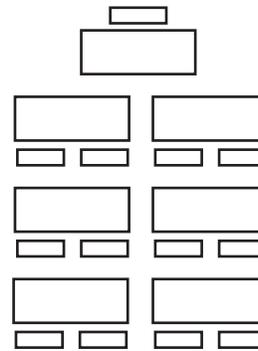
Banquet



Boardroom



Classroom



Tables and Chairs

of Round: _____

of Rectangle: _____

of Chairs: _____

Available Rooms:	Classroom seating	Banquet seating	Boardroom seating	Theater seating
Lehigh Multi-Purpose Room (stage)	27	32	20	30
Lloyd Multi-Purpose Room	45	56	20	72
Briggs Multi-Purpose Room	54	72	20	90
Mitchell Multi-Purpose Room	51	64	20	84
Garfield Commons (all 4 rooms)	96	136	51	220

*Party Room is already furnished and setup for daily use.

Payment Options

50% of payment is due when event is booked.

The last 50% is due 1 week prior to event.

Check: Check # _____

Credit Card #: _____ Expiration Date: _____

Facility Rental Refund Cancellation Policy: If event is cancelled less than 7 days before the scheduled event, a 50% refund will be given.

If my application is approved, I agree to the following:

All persons to whom permits have been granted must agree in writing to hold the town, its employees and agents harmless, and indemnify same from any and all liability for injury to persons or property occurring as a result of the activity sponsored by permittee and said person shall be liable to the town for any and all damage to parks, recreation facilities and equipment owned by same, which results from or during the activity of permittee or is caused by participant in said activity.
(Ord. 14-2005, 1-12-2005) All persons agree to comply with the Town of Erie Municipal Code and all Parks and Recreation regulations.

Printed Name: _____ Signature: _____ Date: ____/____/____