

Sheffield Village Municipal Complex Community Room Rental Agreement

Name _____

Address _____

Home Phone _____ Cell Phone _____

Resident Yes No
Employee Yes No
What type of event are you planning?

Date Requested _____ Time Requested: from _____ to _____

Payment: Cash Check _____

Deposit in advance: Cash Check _____

How would you like your deposit check returned: ___ pick up ___ via mail ___ void/shred

Are tables required? YES NO
Is kitchenette required? YES NO

**All garbage is to be placed in bags and taken to the dumpster by the Fire Department.
Community Room & Kitchenette must be returned to their previous condition.**

I hereby undertake to indemnify and save harmless the Village of Sheffield from any and all liability and damages it may suffer as a result of claims, demands, costs or judgments against it arising out of the uses stated in this Agreement.

I understand that the event is being videotaped and under surveillance at all times by the Police Department to ensure all actions and activities are documented.

Any damage over the \$100 deposit will be billed and required to be paid by the renter (ie. spills on carpet requiring carpet cleaning, damage to wall or furniture, etc.).

I have reviewed this agreement and agree to all terms listed above.

Signature Date

Approved by: _____ Confirmed by: _____

**I have read and received a copy of the
Sheffield Village Municipal Complex
Community Room Rules & Regulations:** _____
Signature Date

All inquiries may be directed to:
Sheffield Village Municipal Complex
4340 Colorado Avenue * Sheffield Village OH 44054 * 440-949-6325 x2224
Monday – Friday 8:00am – 4:00pm