

Community Room Rental Agreement

Please fill out this form completely and fax or return to KVMR at least two weeks in advance of your rental date. Early reservations are recommended.

Organization/Event Nar	me	
Contact Person		
Contact Phone		e-mail
Date(s) you want to use	the room	
Start time	End time	(Please include your set-up and clean-up time.)
Briefly describe nature of	of your meeting(s)	
Number of persons expe	ected to attend	(34 is the maximum)
	onditions and responsibilities	nity resource. KVMR reserves the right to ask any user to leave if they soutlined in this policy, or if the user's activities pose a threat to the
destruction of property of this agreement. I agree t	or injuries to any persons. A o accept responsibility for a	narmless from any liability for damage, loss or ny claims for such loss, damage, or injury are waived by signing ny damage occurring to the KVMR Community Room or its ill bear the full cost of repair, including replacement, if necessary.
I agree to the conditions	outlined in the KVMR Cor	mmunity Room Rental Policy and Application/Agreement.
Signature:		Date:
Printed Name:		
Fees Due:	_	

Agreement and fees can be mailed to: KVMR, Attn: Community Room Rental, 120 Bridge Street, Nevada City, CA

95959 or dropped off at our office during business hours (M-F, 9-5).