



DECATUR PARKS & RECREATION

# FACILITY RENTAL FORM

(Please print all information)

Date Revised 1/15/09

FACILITY TO BE USED \_\_\_\_\_ DATE TO BE USED \_\_\_\_\_

NAME OF ORGANIZATION \_\_\_\_\_

TIME TO OPEN DOORS: \_\_\_\_\_ TO \_\_\_\_\_ TIME OF EVENT: \_\_\_\_\_ TO \_\_\_\_\_

How many people? Adults \_\_\_\_\_ Teens \_\_\_\_\_ Children \_\_\_\_\_

Has this group used this facility previously? \_\_\_\_\_ When? \_\_\_\_\_

Will you be charging a fee? \_\_\_\_\_ How much? \_\_\_\_\_

Rooms to be used: \_\_\_\_\_

\_\_\_\_\_

Equipment required. Be specific \_\_\_\_\_

\_\_\_\_\_

Describe the activity or purpose for which facility is to be used. Be specific \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The above named organization and the adult (or adults) whose signature(s) is (are) affixed hereto assumes full responsibilities for all property and fixtures at the aforementioned facility. Any and all damages occurring during the time used by the above organization (or by the signer below) will be paid to the extent that the facility will be placed in the same order as it was just prior to the above group's using it.

\_\_\_\_\_  
Person in Charge

\_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

\_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

\_\_\_\_\_  
Signature of person in charge \_\_\_\_\_ Date Signed \_\_\_\_\_

\*\*\*\*\*  
DO NOT WRITE BELOW THIS LINE OFFICE USE ONLY

Facility Rent is charged beginning with the requested opening time and ends at the time of closing. Any portion of an hour shall be charged as a full hour. All payments are to be made payable to Decatur Parks and Recreation in advance.

\_\_\_\_ Gymnasium            \$110 for the first 2 hrs (2 hour minimum) \$35 each additional hour  
\_\_\_\_ Gymnasium            \$240 for the first 2 hrs (2 hour minimum) \$100 each additional hour  
    Price if group renting is charging an entry fee.  
\_\_\_\_ Meeting Room        \$70 for the first 2 hrs (2 hour minimum) \$15 each additional hour  
\_\_\_\_ Kitchen                \$10 per hour  
\_\_\_\_ Tables                 \$3 per table  
\_\_\_\_ Chairs                 \$10 per 50 chairs  
\_\_\_\_ Damage Deposit      \$150

**Pool Rental (Aquadome and Carrie Matthews)**

\_\_\_\_ 1-30 people            \$140 for the first 2 hours (2 hour minimum) \$50 each additional hour  
\_\_\_\_ 31-60 people         \$180 for the first 2 hours (2 hour minimum) \$70 each additional hour  
\_\_\_\_ 61-80 people         \$220 for the first 2 hours (2 hour minimum) \$90 each additional hour

Supervisor Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Scheduled Worker(s) for rental \_\_\_\_\_

Center Approval by \_\_\_\_\_ Date \_\_\_\_\_

Department Approval by \_\_\_\_\_ Date \_\_\_\_\_

Total Rental Fee Due \_\_\_\_\_ Payment Due by \_\_\_\_\_

Payment Received on \_\_\_\_\_ Receipt Number \_\_\_\_\_

Payment Received by \_\_\_\_\_

Complimentary Use approved by \_\_\_\_\_ Date \_\_\_\_\_

Explanation for complimentary use: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**AN ADDITIONAL FORM IS REQUIRED FOR DANCES AND GROUPS OF 20 OR MORE**