



DECATUR PARKS & RECREATION

# SPECIAL EVENT FORM

At OSB - Depot

(Please print all information clearly)

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

PRIVATE OR PUBLIC EVENT? \_\_\_\_\_

NAME OF ORGANIZATION/INDIVIDUAL \_\_\_\_\_

SET-UP & CLEAN UP TIME: FROM \_\_\_\_\_ TO \_\_\_\_\_

ACTUAL TIME OF EVENT: FROM \_\_\_\_\_ TO \_\_\_\_\_

Approximately how many people? \_\_\_\_\_

Equipment being taken to the museum. Please be specific.

Describe the activity or purpose for which museum is to be used. Please be specific.

The organization named above and the adult (or adults) whose signature(s) is (are) affixed hereto assumes full responsibilities for all property at the Old State Bank and the Train Depot. Any and all damages occurring to the park landscape, etc., 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 before the above group's using it. *This request is pending until confirmed by email or a phone call.*

Person in Charge

Email Address

Mailing Address

City

State

Zip Code

Cell Phone

Work Phone

Signature of the person in charge

Date Signed

**Please turn in this request for approval to the Old State Bank or email it to Suzanne Langdon at [slangdon@decalur.-al.gov](mailto:slangdon@decalur.-al.gov). Call Suzanne with questions, 256-280-1666.**

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 City of Decatur in advance. Cash or check only.

Rental Fee \$100 for two hours. Minimum of two hour use. \$50 for each hour after that.

Please provide vendor contact info below, if using any (name & phone number):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Total Hours \_\_\_\_\_

Event Notes: \_\_\_\_\_  
\_\_\_\_\_

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

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

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

Payment Received on \_\_\_\_\_ Form of Payment \_\_\_\_\_

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

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

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