

JL Campbell Mayor

Po Box 366 Sutton WV 26601 307-765-5581

Joan Bias Recorder

AGREEMENT FOR USE OF SUTTON COMMUNITY BUILDING

Name of person/organization requesting rental:			
Contact Person:			
Address:	Pho	Phone:	
Date(s) requested:	Time of Event:	to	
Type of Event:			
 Upon being granted permission to use the and regulations: You are responsible for cleaning the after use, sweeping & mopping the flobby and, in general, leaving the Cothe next group to use it. The Town of Sutton, by designated of use there of. I understand that I/We will of, and any broken fixtures or proper I/We assume the responsibility of cleathere is a \$50.00 fee for the rental of is a \$25.00 fee for the rental of the deposit. I/We understand that there must be coby an adult 21 years or older. I further thereof, assume no liability, whatsoe undersigned agrees to hold the Town all claims of loss, damage, or liability suffered or claimed by reason of or reflection. I/We understand that no tobacco, alcohisturbance. I/We have read and understand the afthe same exchange for the use of said. 	community building, including loors, emptying the trash, clear community Center as nice as your officials will inspect the premise will be responsible for any dated during the time of occupational inspect the premises for clear try to the secretary or by calling ean-up for the rooms after the father upstairs with a \$25.00 responsible to the upstairs meeting room with the continuous, onsite supervisional er understand that the Town of the Unde	ng the kitchen area and the tables aning the bathrooms, stairs, ou found it, clean and ready for ises prior to and following the mages to chairs, tables, or other n. anliness and report the lack there ng 644-6107 immediately. By are used. I/We understand that fundable cleaning deposit. There a @15.00 refundable cleaning a for anyone under the age of 21 of Sutton and he city officials rty, and further that the unity if with respects to any and and for any expense incurred, d's use thereof. d, nor any violence or	
Signature		Date	
Received By:	_ Date:		
\$ Amt. Received:	\$Amt. Refunded	Date:	