

APPLICATION AND PERMIT

Area/Facility Reserved: Carroll Civic Center

Group/Organization/Person in Charge: _____

Address: _____ Telephone: _____

Purpose: _____ Number in Party: _____

Date Reserved: _____ Hours: _____ to _____

I

The Village of Carroll reserves the right to deny use of the Carroll Civic Center facilities to groups/organizations and individuals who fail to comply with the rules and regulations set forth.

II

It is understood that the Group/Organization/Person using the above designated facility will comply with all applicable State and Local laws and all rules and regulations set forth by the Village of Carroll. In addition, the Group/Organization/Person will:

- **Be responsible for all persons in the group or organization using the facility**
- **Assume responsibility for any damage to the facility**
- **Park only in designated areas**
- **Observe all posted rules**
- **Not allow smoking or the consumption of alcoholic beverages**

III

The following rental charges for the facility apply:

\$50.00 for up to and including 4 hours;
\$75.00 for over 4 hours and up to and including 8 hours;
\$100.00 for anything over 8 hours.

A deposit in the same amount as the rental cost is required. It shall be submitted in a separate check that will be returned when the building is left clean and orderly, and in the same condition as found.

I have read and understood the above policies and requirements and agree to comply with same.

X _____

For and in consideration of permission given to use the above described facility, I, the undersigned, acquit, discharge and covenant to hold harmless the Village of Carroll, its officers, employees, servants and agents of and from any and all actions, causes of actions, claims, demands for damages, costs, loss of services, expenses and compensation, on or account of, or in any way growing out of, any and all personal injury or property damage which may result to group/organization members or individuals as a result of participation in the aforementioned activity at the above described facility.

Date

X _____
Signature of Person Responsible

Date

X _____
Signature of Carroll Civic Center Representative