Gaithersburg
A CHARACTER COUNTS! CITY

Community Center 810 S. Frederick Ave.
Gaithersburg, MD 20877 301-258-6366

RENTAL #

Expected Attendance:

2019 Casey Community Center Facility Use Application

Today's Date _____ Day/Date Requested: _____ Times:_____ to _____

Applicant's Name _____

Organization Name _____

Address _____ City _____ State _____ Zip _____

City Resident ☐ Nonresident ☐ ***(All applicants must show current driver's license to determine residency)***

Day # _____ Evening # _____ Cell # _____

E-mail address:_____

Description of Event: _____ Surprise: Y ☐ N ☐

Do you plan to serve/consume alcohol? Y ☐ ($130 fee for permit) N ☐ ***** **Beer/wine/champagne ONLY!** *****

Will you be having music? Y ☐ N ☐ **Type:** (i.e. DJ) _____ (NO LIVE BANDS)

Room Requested:
- ☐ Casey (A)
- ☐ Gaither (B)
- ☐ Summit (D)
- ☐ Peachtree (E)
- ☐ Oak (F)
- ☐ Aspen (G)

Requested Equipment:
- ☐ _____ Chairs; how many?
- ☐ _____ Rectangular tables (6 ft. - standard) how many?
- ☐ _____ Round tables (4 ft.) how many?

Do you plan on using candles of any sort? Y ☐ N ☐ _____

The applicant/organization has the right to use the Community Center for the specific purpose listed above, accepts responsibility to abide by all policies and procedures highlighted below and outlined in the "Rental Program" document and understands penalties associated with not abiding by these stipulations. In addition, applicant agrees that by signing this application, the City of Gaithersburg is authorized to charge applicants credit card and/or process checks and cash for specified fees .Applicant also consents to the City's use of photos/or video made of the rental.

1. Set-up and take down of all chairs, tables, and other equipment (tables and chairs must be wiped off and placed on racks (Set and clean-up time MUST be paid for and included in your rental)
2. Event must be conducted in an orderly manner and music/amplification must be kept at a level that does not disturb other functions in the building.
3. At the conclusion of your event, sweep the floor,bag all trash and deposit in the dumpster.
4. **Leave room(s) in the same condition as they were found.**
5. A $25 administrative fee will be applied to each date and time change.
6. Provide designated number of chaperones and security for under age events and supply guest list to Facility Director a month before the before date of event.
7. The City has the right to cancel or postpone an event at anytime due to unforeseen circumstances.
8. ALL cancellations are subject to a minimum $10 processing fee.
9. ***Applicant** must **sign in** and **be present** for **entire** event or **deposit will be forfeited and event canceled.***

The applicant furthermore agrees to indemnify and hold harmless the City and its agents against any and all losses, injuries or damages to any person or thing that shall arise from the applicant's use of the Casey Community Center.

Date of Request: _____ **Signature of Applicant:** _____

ALL DEPOSIT PAYMENTS WILL BE PROCESSED.

**** For ALL under 21 events and other events designated by the Director, a bonded security guard and guest list is due by : _____/_____/ _____.**

All rental fees are due by: _____/_____/_____.

CREDIT CARD PAYEE MUST COMPLETE THE FOLLOWING:

Payee' Name _____

Payee's Address _____

City _____ **State** _____ **Zip** _____

Day # _____ **Evening #** _____ **Cell #** _____

E-Mail Address _____

Visa ☐ M/C ☐ Discover ☐ Am Ex ☐ _____ **Exp. Date** _____/_____

Signature of card holder _____ **Date** _____/_____/_____

For Center Staff only:

Date Rec'd: _____ **By:** _____

Driver's License # _____

Rate per hour $ _____ **x # of Hours** _____ **=** $ _____ Rental fee

$ _____ AB Permit ($130.00)

$ _____ After hours fee ($17.50)

$ _____ **(OTHER FEES)

$ _____ **SUBTOTAL**

$ _____ Security Deposit ($250.00)

$ _____ **GRAND TOTAL**

** OTHER FEES:

- ☐ Podium $50
- ☐ Microphone $50
- ☐ Fireplace $50
- ☐ Projector $25
- ☐ TV/VCR $25
- ☐ Food warmer $25
- ☐ Coffee Maker $25

Total Other Fees $ _____

Security Deposit: ($250.00) Amount: _____ Date Rec'd: _____ Cash ☐ Check # _____

Credit Card (Visa/MC/Discover/AmEx) _____ Exp. _____/_____

Security Deposit Rec'd by _____ Date ____/_____/_____

Request Approved by: _____ Date _____

Rental Fees Paid: Amount $ _____ Date Paid _____/_____/_____ Rec'd by _____

Cash ☐ Credit Card ☐ Check # _____

	Rental By:	**Resident**	**Nonresident**
Individual	_____	_____	_____
Nonprofit	_____	_____	_____
Business or Commercial	_____	_____	_____

rev. 2/12/19