

Deposit – Date _____ Cash _____ Ck# _____ / Rental Fee - Date _____ Cash _____ Ck# _____

V ~ #
(01/2012) Pick Up - Date _____ Key Return - Date _____ / Deposit Return - Date _____ Ck# _____

Town of Mamakating
Janet Lybolt, Supervisor



Key MUST be picked up by Friday before 4:00 pm

Facility Rental Agreement

Check one:

Rental Fee:

	<u>Resident</u>	<u>Non-Resident</u>
___ Community Room AC, Kitchen, 12 Rectangular Tables, Seats 97	\$300.00	\$450.00
___ Recreation Building (Large) A/C, Kitchen, 12 Round Tables, Seats 98	\$250.00	\$400.00
___ Drama Building (Small) A/C, Refrigerator, 10 Rectangular Tables, Seats 75	\$200.00	\$325.00
___ Pool Pavilion – w/Picnic Tables, BBQ Grills, Lights, Seats 80	\$125.00	\$225.00 * NO GLASS
___ Rotary Pavilion – w/Picnic Tables, BBQ Grills, Seats 160	\$175.00	\$300.00 * NO GLASS
___ Soccer Field – Includes Goals, Bleachers, Team Benches	\$ 30.00	\$ 75.00
___ Baseball Field – Regulation Size Field, Dugouts, Player Benches, Bleachers	\$ 30.00	\$ 75.00
___ Seasonal Ball Field – Spring/Fall (Morning ___ / Evening ___)	\$240.00	\$425.00
___ 762 South Rd./Environmental Education Interperative Ctr	Please inquire for pricing	

NOT FOR PROFIT RENTALS PLEASE NOTE: 1 rental per 6 months per facility at \$50 fee -

ALL groups over 10 people are required to REGISTER & PAY at TOWN HALL

Supervisor’s Office – (845) 888-3000 Option 0

BOUNCY HOUSES ARE ONLY ALLOWED WITH PROOF OF INSURANCE LIABILITY IN THE TOWN’S NAME FROM THE PLACE OF RENTAL.

*** ALL RENTALS REQUIRE A \$300.00 for Residents/\$400 for Non-Residents DAMAGE/CLEANING /SECURITY DEPOSIT ***

**CANCELATIONS MUST BE DONE 30 DAYS PRIOR TO RENTAL OR SECURITY DEPOSITS WILL NOT BE RETURNED
 LOST KEYS WILL RESULT IN LOSS OF DEPOSIT AS WELL AS POSSIBLE ADDITIONAL FEES!**

(Deposit will be refunded by check within 1-2 weeks after return of key and damage check of premises.)

All balances must be paid two weeks prior to event!

PLEASE NOTE: YOUR RENTAL IS ONLY FOR THE DATE RESERVED. (9am – Midnight)

You must have the building cleaned and be out by Midnight the same day.

Day/Date of Event _____, _____, _____ Event Type _____
(Day of Week) (Month) (Date) (Year)

Name of Person Responsible _____

Address _____

Phone (Home) _____ (Cell) _____

<input type="checkbox"/> RESIDENT <small>(Proof Required)</small>
<input type="checkbox"/> NON-RESIDENT

I am at least 21 years of age, and I agree to abide by all the policies, rules, and regulations as set forth in the Town of Mamakating Parks & Recreation Facilities Rental & Informational Brochure (copy received upon signing this Rental Agreement); as well as hold the Town of Mamakating and its employees harmless and indemnified from all damages, claims, and liabilities that may arise from or occur as a result of the negligence, gross negligence, or reckless conduct of any individuals attending my event.

SIGNATURE: _____ **Date:** _____