

**Jimmie O. Rector Community Center  
Facility Reservation Form**

Today's Date: \_\_\_\_\_

Renter Group Name: \_\_\_\_\_

Responsible Party: \_\_\_\_\_

Phone # Day: \_\_\_\_\_ Evening: \_\_\_\_\_

Address: \_\_\_\_\_

**Reservation Date:** \_\_\_\_\_ **Rental Time Period:** \_\_\_\_\_

\* You have access to the building ½ hr. before and ½ hr. after your rental time. If you need additional time to decorate, please schedule accordingly.

Rental Area:	Hours:	over 4 hrs:	Fee:
Multi-purpose room	_____	_____	= _____
Rooms A & B	_____	_____	= _____
Room A	_____	_____	= _____
Room B	_____	_____	= _____
Total Area	_____	_____	= _____
Kitchen Fee	_____	_____	= _____
Other	_____	_____	= _____

Clean-up deposit: \_\_\_\_\_

Ck# \_\_\_\_\_ cash \_\_\_\_\_

returned: yes \_\_\_ no \_\_\_

Total Rental Fee: \_\_\_\_\_

Rental Deposit: \_\_\_\_\_

**Balance Due:** \_\_\_\_\_

Ck# \_\_\_\_\_ cash \_\_\_\_\_

Type of activity \_\_\_\_\_

Is food to be served? \_\_\_\_\_ Number expected? \_\_\_\_\_ Admission? \_\_\_\_\_

Desired equipment\*? \_\_\_\_\_

\*Please sketch diagram of table/chair arrangement on the diagram provided.

**I agree to be responsible for the behavior of the persons attending this activity. I agree to be responsible for leaving the building clean and for paying any and all damages that may occur during this rental. I understand that the clean-up fee will be forfeited if the facility is not left clean (floor swept, spills mopped, trash taken to the dumpster, etc.). I understand that absolutely NO DRUGS OR ALCOHOL are allowed on the premises of the Jimmie O. Rector Community Center.**

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
PARD Employee

\_\_\_\_\_  
PARD Director