

**VILLAGE OF WEST JEFFERSON  
COMMUNITY CENTER RENTAL**

NAME/ORGANIZATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/STATE/ZIP: \_\_\_\_\_

CELL PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_ EMAIL: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_

\*\*\*\*\*

EVENT DATE: \_\_\_\_\_ BEGIN: \_\_\_\_\_ END: \_\_\_\_\_

TYPE OF EVENT: \_\_\_\_\_

NUMBER OF EXPECTED TO ATTEND: \_\_\_\_\_

USE OF KITCHEN? \_\_\_\_\_ YES \_\_\_\_\_ NO

DEPOSIT: \_\_\_\_\_ RENTAL FEE: \_\_\_\_\_ FORM OF PAYMENT: \_\_\_\_\_ DATE: \_\_\_\_\_

EVENT DETAILS/SPEICAL INFO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

VILLAGE SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**\*\* PLEASE READ RENTAL AGREEMENT \*\***

**\*\*I HEREBY ATTEST TO THE TRUTH AND EXACTNESS OF ALL INFORMATION SUPPLIED ON AND WITH THIS APPLICATION AND AGREE TO HOLD THE VILLAGE OF WEST JEFFERSON, OH, IT'S COUNCIL MEMBERS, EMPLOYEES AND AGENTS FROM ANY CLAIM AND LIABILITY RELATED TO THE USE OF THE FACILITIES AND ACCEPT FULL RESPONSIBLTY FOR ANY AND ALL DAMAGES THAT OCCUR DURING MY RENTAL TIME. \*\***