

# Village of Chase

## Community Hall Rental Application

Name		
Organization (if applicable)		
Email Address	Phone	Number
Mailing Address		
Street Address		
City/Town/Village		
Rental Date(s)	Time from	to
Indicate rental options. Ir	nclude the time required to perform	n set-up and clean-up.
Upper Hall – 12 hours	Room A – 12 hours	Room C – 12 hours
Upper Hall – 8 hours	Room A – 4 hours	Room C – 4 hours
Upper Hall – Weekly	Room A – Hourly	Room C – Hourly
Upper Hall – Weekend	Room B – 12 hours	Kitchen – Dishes Only
Commemorative Service – up to 5 hours	Room B – 4 hours	Full Kitchen
PA/Audio-Video System	Room B – Hourly	Bar
payment is required if less that The non-refundable rental dep	deposit is required 15 or more on the following the second of the second	al Fee.
Special Event Liquor Permit Numl	ber (if applicable)	
It is your responsibility to ensure a event.	all applicable permits and/or lice	enses are in place for your





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#### OTHER PERMITS

Special Event Liquor Permit Number (if applicable)
It is your responsibility to ensure all applicable permits and/or licenses are in place for your event.
DAMAGE DEPOSIT
<ul> <li>A Damage Deposit is required as per the Fees and Charges Bylaw 820-2016. If the Hall is in a condition acceptable to Village staff the Damage Deposit will be refunded.</li> <li>If the key is not returned within 5 business days a charge of \$100 will be retained by the Village. If the key is subsequently returned, this amount will be refunded.</li> <li>Deposits will be refunded within 10 business days.</li> <li>If applicable, cleaning charges will be deducted from the Deposit at a rate of \$60 per hour plus a 15% administration fee.</li> </ul>
Applicable fees and the full rental amounts must be paid 15 days prior to the event or at the time of booking if less than 15 days.
I have read and understand the User Group Obligations and Community Hall Policy pertaining to the use of the Chase Community Hall  I am 19 years of age or older
I understand that Wi-Fi is NOT part of the rental

I certify the information in this form is true and I understand my legal obligation as the Applicant.

I understand that all forms of smoking and vaping is prohibited on the property

I agree to adhere to the Terms & Conditions as set out in the Community Hall Policy.

Signature of Applicant \_\_\_\_\_ Date of Application \_\_\_\_\_

Personal information on this form is collected under the *Freedom of Information and Protection of Privacy Act*. Any questions regarding this collection should be directed to the Corporate Officer.

