BALDWIN COMMUNITY CENTER RENTAL FEES*

Multi-Purpose Room: \$30.00 for one hour, \$50.00 for two hours, and \$15.00 per hour for each additional hour.

<u>Kitchen</u>: \$20.00 for one hour, \$35.00 for two hours, and \$10.00 per hour for each additional hour.

Multi-Purpose Room and Kitchen: \$45.00 for one hour, \$75.00 for two hours, and \$22.50 hour for each additional hour.

Meeting Room: \$20.00 for one hour, \$35.00 for two hours, and \$10.00 for each additional hour.

* Fees for frequent or regular users may vary from this fee schedule.

BALDWIN COMMUNITY CENTER RULES AND REGULATIONS

- 1. Each user must designate at least one contact person. Contact person(s) are responsible for ensuring that all rules and regulations and conditions of approval are followed. At least one designated contact person must be present at all times when his/her group is using the Community Center.
- 2. A user may not use any portion of the Community Center other than the areas checked in the Facility Use Agreement and the bathrooms across from the Town Office.
- 3. Alcoholic beverages and smoking are not permitted in the Community Center or on the grounds.
- 4. Adult supervision is required at all times for activities involving children under 18 years of age.
- 5. Users must thoroughly clean the areas they use (including the bathrooms), remove all trash, and return all town property, such as chairs, tables, and kitchen items, to the location where they were found.
- 6. Kitchen users must provide their own kitchen utensils, plates, cups, paper products, sponges, and towels.
- 7. Kitchen users must clean counters, sinks, appliances, floors, and kitchen accessories, turn off all appliances except the refrigerator, and remove their items from the refrigerator.
- 8. Users and contact persons are liable for any damaged, stolen, or missing town property.
- 9. Users that fail to comply with these rules and regulations or any conditions of approval may lose their privilege to use the Community Center.

Baldwin Community Center – Facility Use Agreement

Applicant Information			
Applicant Name:			
Contact Name(s)			
Mailing address:			
City:	State:	ZIP Code:	
Home/Business Phone:	Cell Phone:		
Email Address:			
Function Information	of the property	W TO TO	
Type of Event:			
Date of Event:	14		
Facilities Needed:			
Multi-purpose Room	Meeting Room		
Kitchen:	Other:		
Special Requests:	·		
Approx. Number of People:	Charge per perso	Charge per person (if any):	
Time entering the Center:	Time Exiting the	Time Exiting the Center:	
Food Information		A CASH COMPANY	
Food to be served?	ame and telephone number	r of Caterer (if applica bl e)	
Type of Food:			
Insurance Information			
The Town of Baldwin's insurance does not pro Center. The Town encourages applicants to coverage.			

If the applicant is a business, do you have liability insurance?	Name of Carrier: Phone:
By signing below, the applicant and the designated contact person (a) verify that the above information is correct. (b) agree that they will comply with the rules and regulations attach stated below. (c) acknowledge that if this request is approved, applicant understanonexclusive revocable license to use the facilities checked above (d) release the Town of Baldwin from all liability for any damage or applicant's use of the facility; and (e) agree to indemnify and hold the Town of Baldwin harmless from injury, including, but not limited to, reasonable attorney's fees.	ed to this agreement and any conditions of approval ands that the Town of Baldwin is granting a only for the dates and times specified. injury to persons or property arising out of
Signatures	Name and American Street, Stre
Signature of Applicant:	
Date:	
*************************	**************************************
TO BE COMPLETED BY TH	IE TOWN OF BALDWIN
The above request to use the Baldwin Community Center	er is Approved Denied
Rental Fee \$ *** Rental fee must be p	aid in full to reserve date. ***
CANCELLATION TERMS: Cancellation within 14 days of the rental date will result i The aforesaid fee to be taken from original rental payme	1 1
Conditions of Approval.	
If a certificate of insurance naming the Town as an addition above as a condition of approval, this certificate must be reassistant no later than	
Signature	Date: