## COMMUNITY ROOM RESERVATION FORM & USE AGREEMENT CITY OF YOUNG HARRIS

DATE OF RENTAL:		NO. OF PEOPLE EXPECTED:			
APPLICANT NAME: _		TYPE OF EVENT:			
MAILING ADDRESS:					
	Street	City	State	Zip	
PHONE:	ALT PHONE:	EMAIL	:		
RENTAL FEE:       CITY RESIDENTS = \$75 (\$50 plus \$25 Deposit)         NON RESIDENTS = \$100 (\$75 plus \$25 Deposit)         ** Payments accepted in cash or check payable to the City of Young Harris **					
	RULES &	INSTRUCTIONS			
<ul> <li>IF THE ROOM IS NOT IN GOOD CONDITION WHEN YOU ARRIVE CALL THE ON-CALL TELEPHONE NUMBER 706-835-7963</li> <li>NO ALCOHOLIC BEVERAGES ALLOWED.</li> <li>ABSOLUTELY NO TAPE, TACKS, OR PINS IN OR ON THE WALLS!! IF YOU DO YOUR DEPOSIT WILL NOT BE RETURNED AND YOU MAY BE BILLED FOR DAMAGES!!</li> <li>DO NOT STACK CHAIRS AGAINST THE WALLS.</li> <li>REMOVE ALL TRASH - TAKE ALL TRASH HOME WITH YOU - DEPOSITS WILL NOT BE RETURNED IF TRASH IS LEFT IN THE BUILDING OR OUTSIDE TRASH CANS.</li> <li>TABLES AND CHAIRS SHOULD BE PLACED ACCORDING TO ATTACHED DRAWING. NO WRITING OR MARKING ON TABLES. DEPOSIT WILL NOT BE REFUNDED IF FURNITURE NOT PLACED AS ON THE DRAWING.</li> <li>CLEAN ALL TABLES AND ALL CARPET SPILLS! CLEANING SUPPLIES ARE IN THE CLOSET INCLUDING CARPET SPOT CLEANER.</li> <li>THERE WILL BE A CLEANING CHARGE OR REPAIR CHARGE EQUAL TO THE COST OF EXCESSIVE CLEANING AND/OR REPAIRING DAMAGE IF APPLICABLE.</li> <li>CHECK TO SEE THAT THE STOVE IS OFF! CHECK TO SEE THAT THE WATER IS OFF AND SINKS ARE CLEAN.</li> <li>MAKE SURE THE ROOMS, INCLUDING RESTROOMS, ARE NEAT AND CLEAN. THE VACUUM CLEANER IS IN THE CLOSET.</li> <li>TURN THE THERMOSTAT TO 65 IN WINTER (HEAT) AND TO 75 (A/C) IN SUMMER BEFORE YOU LEAVE.</li> <li>REMEMBER TO REMOVE ALL YOUR SUPPLIES BEFORE LEAVING. THE ROOM IS PROBABLY RENTED TO SOMEONE ELSE THE NEXT DAYINIMINI</li> <li>TURN OFF LIGHTS.</li> <li>MAKE SURE THE DOORS ARE LOCKED! DEPOSIT KEY INTO THE DROP BOX.</li> <li>IF YOU USE THE UMBRELLA OUTSIDE ON THE DECK BE SURE TO CLOSE IT BEFORE YOU LEAVE OR YOU WILL BE CHARGED FOR THE COST OF REPLACEMENT IF THE WIND BREAKS THE UMBRELLA.</li> <li>REPORT ANY DANGEROUS CONDITIONS TO THE ON-CALL NUMBER IMMEDIATELY</li> </ul>					
RELEASE OF LIABILITY					

I have been informed of and understand the Rules and Instructions governing the use of the City's facilities and I agree to abide by same. I assume all risks normally incidental to the use of a facility of this type including risks which are not specifically foreseeable. I hereby agree to release, indemnify, save and hold harmless the City of Young Harris, its employees, agents and representatives from all liability, actions, causes of action, debts, claims or demands of any kind

and nature whatsoever which may arise by or in connection with my use of this facility. I understand that I am signing this Release of Liability on behalf of myself and of all persons using the facility as my guest or invitee or otherwise pursuant to this use agreement. I understand that I am responsible for communicating all of the Rules and Instructions to my guests and invitees using this facility, and for enforcing their compliance thereto. I FURTHER UNDERSTAND THAT I WILL BE HELD RESPONSIBLE FOR ANY DAMAGES TO CITY PROPERTY THAT MAY RESULT FROM MY USE OF THIS FACILITY.

APPLICANT SIGNATURE:	DATE:
OFFICE USE ONLY:	** ***** ***** ***** ***** ***** ***** ****
Key #:	
Fee Paid? Y / N Cash / Check #	Amount \$
Application received by:	
Deposit Returned? Y / N Check#	Date Amount \$
Reason for not returning Deposit:	