



APPLICATION FOR RENTAL OF TRAINING ROOM

Name of Organization _____

Organization is NON-PROFIT _____ PROFIT _____

Contact Person _____

Address _____

City _____ Zip Code _____ Phone _____

Drivers License _____

Purpose of Rental _____

Date and Day of Week Desired _____

Time (including preparation) _____ to _____

Estimated Attendance _____ persons

I hereby state that I have read the attached policies and procedures of the City of Northville relative to the use of the identified facilities and agree to all arrangements therein stated. My organization agrees to indemnify, defend and hold the City of Northville and its employees harmless from any claim made arising during or because of our use of the building. We will not hold the City of Northville responsible for any injury or illness sustained while participating in an activity at the building. I fully understand that medical insurance is the sole responsibility of the participants. I, the undersigned, have the authority to sign this agreement on behalf of my organization.

Signature of Applicant

Date

Registered Non-Profit Organization:	\$11.00/hr.	_____
Private / Profit Organization:	\$28.00/hr.	_____
Security Deposit:	(Discretion of City Manager)	_____
TOTAL AMOUNT DUE		_____

This application must be completed, signed, and dated prior to processing by the City of Northville. Proof of liability insurance may be required. City government reserves the right for priority use of its facilities at any time.

FOR STAFF USE ONLY

Approved: _____ Date: _____

Fee Due: _____ Amount Received _____ Date: _____

Code #027