

Fall Creek Township

11565 Brooks School Road
Fishers, IN 46037

shobsonfct@gmail.com

(317) 841-3180

(317) 841-3191 Fax

BASEMENT RENTAL CONTRACT

This is a smoke-free building. • No alcoholic beverages on property.

This agreement made this ____ day of _____, 2017, between _____, Renter (being a Fall Creek Township Resident) and the Fall Creek Township Trustee is made in anticipation of Renter's use of the basement conference room on (day of week) _____ and/or reoccurring (i.e. 1st and 3rd Tuesday) _____. Renter shall have exclusive use of said room from _____ AM/PM to _____ AM/PM. This contract ends on _____.

Monday – Friday Evening Events are ONLY available from 5:00 – 7:00 p.m. or 7:00 – 9:00 p.m. There is a \$50 refundable deposit due at the time of reservation.

Renter agrees to be personally, and (if applicable, on behalf of group/organization), totally responsible for any and all damages and to hold harmless Fall Creek Township and its elected officials of any loss, injury or accompanying expenses to any person or their property, which occurred while Renter is in possession of the property. Ordinary wear and tear is excluded. **Following rules apply:**

- Nothing left in room or on conference room table.
- Restrooms checked, ***trash emptied in conference room and taken to dumpster in parking lot***, lights off, doors closed.
- Floor swept (vacuum provided).
- Table wiped down and chairs put away.
- **NO** glitter, sequin, confetti or Command Strip usage in the rooms. **Tape Only! No Gum!**
- Decorations or other items must be removed and cannot be stored for reoccurring meetings.
- Children are not to be left unattended in the building or lobby areas.
- **All** lights turned off and doors closed.

****FAILURE TO FOLLOW RULES WILL RESULT IN CANCELLATION OF THIS CONTRACT AND FORFEITURE OF DEPOSIT.****

FALL CREEK TOWNSHIP RESERVES THE RIGHT TO VOID THIS CONTRACT

Organization, if applicable: _____

Fall Creek Township Office Use:

Name: _____

Received By: _____

Address: _____

Received Date: _____

Phone: _____

501(c)(3) Received, if applicable: _____

If you would like a verification reminder, via email or phone, three business days prior to your event,

Please initial here: _____ **Phone:** _____ **Email:** _____

Doors will automatically unlock 15 minutes prior to the event start time. Any problems after township office hours, please call the number on the community room door. Please note that the Fire Station does not have access to the community room. ***Please bring a copy of this contract to your event, this will allow entry should there be any maintenance issues with the door locks.***