

Sointula Community Pavilion Rental Agreement



Contact Details

Name: _____ Phone: _____

Business/Organization Name (if applicable): _____

Email: _____ Malcolm Island resident: Yes No

Rental Details

Rental date: _____ Hours: from _____ to _____

One day event or multiple days? One day Multiple Days

Please list all requested days (if more than one-day rental): _____

Type of function: _____ Expected # of people: _____

Do you require access to chairs? Yes No

Are you charging participants a fee to attend your event? Yes No

Will alcohol be served at your event? Yes No

Signature of Applicant

Date

By signing this agreement I confirm that I have read and understand the terms and conditions as outlined in the "Sointula Community Pavilion Renter Responsibilities".

For Office Use Only	
<input type="checkbox"/> \$50.00 deposit received	Date returned: _____ Method of return: _____
<input type="checkbox"/> Booking fee received	Date: _____ <input type="checkbox"/> % of revenue <input type="checkbox"/> full amount
Chair key provided: <input type="checkbox"/> Yes <input type="checkbox"/> No	Returned: <input type="checkbox"/> Yes <input type="checkbox"/> No
Authorized by: _____	Date: _____